

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000099432

Entity Name: BINGO PARADISE, INC.

FILED
Jul 09, 2004
Secretary of State

Current Principal Place of Business:

5230 JULIE DR
PANAMA CITY, FL 32404

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 36458
PENSACOLA, FL 32516

New Mailing Address:

FEI Number: 59-3680875

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOODSON, TRACY L
3553 DON JANEAL RD
PENSACOLA, FL 32526 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: ST (X) Delete
Name: WILLIAMS, BECKY
Address: 5230 JULIE DR
City-St-Zip: PANAMA CITY, FL 32404

Title: DV () Delete
Name: HANCOCK, PHELON J
Address: 7625 BLUEBERRY RD
City-St-Zip: PANAMA CITY, FL 32404

Title: DV () Delete
Name: GOODSON, TRACY L
Address: 540 E TEN MILE RD
City-St-Zip: PENSACOLA, FL 32534

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: HANCOCK, PHELON J
Address: 7625 BLUEBERRY RD
City-St-Zip: PANAMA CITY, FL 32404

Title: P (X) Change () Addition
Name: GOODSON, TRACY L
Address: 540 E TEN MILE RD
City-St-Zip: PENSACOLA, FL 32534

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TRACY L. GOODSON

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07/09/2004

Electronic Signature of Signing Officer or Director

Date