

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000005382

FILED
Apr 07, 2004
Secretary of State

Entity Name: CRYSTAL RIVER ORCHID SUPPLIES, INC.

Current Principal Place of Business:

7211 W CRESTVIEW LANE
CRYSTAL RIVER, FL 34429

New Principal Place of Business:

9525 W. CEDAR STREET
CRYSTAL RIVER, FL 34428

Current Mailing Address:

7211 W CRESTVIEW LANE
CRYSTAL RIVER, FL 34429

New Mailing Address:

9525 W. CEDAR STREET
CRYSTAL RIVER, FL 34428

FEI Number: 59-3699937

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WITT, MARIE D
7211 W CRESTVIEW LANE
CRYSTAL RIVER, FL 34429

Name and Address of New Registered Agent:

WITT, MARIE D
9525 W. CEDAR STREET
CRYSTAL RIVER, FL 34428

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

04/07/2004

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WITT, MARIE D
Address: 7211 W CRESTVIEW LANE
City-St-Zip: CRYSTAL RIVER, FL 34429

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WITT, MARIE D
Address: 9525 W. CEDAR STREET
City-St-Zip: CRYSTAL RIVER, FL 34428

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: MARIE D. WITT

D

04/07/2004

Electronic Signature of Signing Officer or Director

Date