

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000007855

FILED
Feb 23, 2004
Secretary of State

Entity Name: PRENTICE FAMILY INVESTMENT PROPERTIES, INC.

Current Principal Place of Business:

734 S. HAMPTON AVENUE
ORLANDO, FL 32803

New Principal Place of Business:

Current Mailing Address:

734 S. HAMPTON AVENUE
ORLANDO, FL 32803

New Mailing Address:

FEI Number: 59-3704925

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCNAIR, CRAIG D MR.
1250 S. U.S. HIGHWAY 17-92
SUITE 250
LONGWOOD, FL 32750 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MCNAIR, CRAIG D MR.
Address: 1250 S. U.S. HWY. 17-92 #250
City-St-Zip: LONGWOOD, FL 32750

Title: P () Delete
Name: MCNAIR, JEAN
Address: 734 S. HAMPTON AVE.
City-St-Zip: ORLANDO, FL 32803

Title: VP () Delete
Name: WOLFE, NANCY
Address: 203 WINDEMER RD.
City-St-Zip: WILMINGTON, NC 28401

Title: S () Delete
Name: PRENTICE, WARREN
Address: 621 CRICKET CT.
City-St-Zip: SACRAMENTO, CA 95864

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: JEAN P. MCNAIR

PRES

02/23/2004

Electronic Signature of Signing Officer or Director

Date