## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## Feb 09, 2004 8:00 am Secretary of State DOCUMENT # P01000010894 02-09-2004 90035 026 \*\*\*158.75 APPEL & ASSOCIATES, INC. Principal Place of Business Mailing Address 24000014 30605 SADDLEBAG TRAIL 30605 SADDLEBAG TRAIL MYAKKA CITY, FL 34251 MYAKKA CITY, FL 34251 2. Principal Place of Business 3. Mailing Address 1760 East Avenue 1760 East Avenue Suite, Apt. #, etc. Suite, Apt. #, etc. 01232004 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For Sarasota. Sarasota, 65-1072187 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 34234 USA 34234 USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name APPEL, CHRISTINE Steven M. Appel 30605 SADDLEBAF TRAIL Street Address (P.O. Box Number is Not Acceptable) MYAKKA CITY, FL 34251 30605 Saddlebag Trail <sup>City</sup> **Myakka City** pose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept for the Vice President SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE **DPAS** Delete Director, President Bärbara B. Appel 1760 East Avenue TITLE Addition XX Change APPEL, CHRISTINE MAME NAME 30605 SADDLEBAG TRAIL STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MYAKKA CITY, FL 34251 CITY-ST-ZIP Sarasota, FL 34234 Director, Vice President Steven M. Appel DVSA X Delete TITLE X Change ☐ Addition APPEL, STEVEN M NAME NAME STREET ADDRESS 30605 SADDLEBAG TRAIL STREET ADDRESS 30605 Saddlebag Trail CITY-ST-ZIP MYAKKA CITY, FL 34251 CITY-ST-ZIP Myakka City, FL 34251 TITLE ☐. Delete TITLE Secretary ☐ Change\_ X Addition NAME NAME Stanley Appel STREET ADDRESS STREET ADDRESS 1760 East Avenue CITY-ST-ZIP CITY-ST-ZIP Sarasota, FL 34234 TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE \_\_\_ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplier ental report is true and accurate and that my 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 of trustee empowered to execute the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if Steven M. Appel (941) 955-1177

NING OFFICER OR DIRECTOR

FILED