

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000034966

Entity Name: CSH, INC.

FILED
Feb 02, 2004
Secretary of State

Current Principal Place of Business:

2900 W HAWTHORNE ROAD
TAMPA, FL 33611

New Principal Place of Business:

3519 N. SAN MIGUEL ST.
TAMPA, FL 33629

Current Mailing Address:

2900 W HAWTHORNE ROAD
TAMPA, FL 33611

New Mailing Address:

3519 N. SAN MIGUEL ST.
TAMPA, FL 33629

FEI Number: 59-3716226

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOPKINS, CHARLES M
2900 W HAWTHORNE ROAD
TAMPA, FL 33611

Name and Address of New Registered Agent:

HOPKINS, CHARLES M
3519 N. SAN MIGUEL ST.
TAMPA, FL 33629

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: CHARLES M. HOPKINS

02/02/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HOPKINS, CHARLES M
Address: 2900 W HAWTHORNE ROAD
City-St-Zip: TAMPA, FL 33611

Title: D () Delete
Name: HOPKINS, SUE E
Address: 2900 W HAWTHORNE ROAD
City-St-Zip: TAMPA, FL 33611

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HOPKINS, CHARLES M
Address: 3519 N. SAN MIGUEL ST
City-St-Zip: TAMPA, FL 33629

Title: D (X) Change () Addition
Name: HOPKINS, SUE E
Address: 3519 N. SAN MIGUEL ST.
City-St-Zip: TAMPA, FL 33629

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: CHARLES M. HOPKINS

D

02/02/2004

Electronic Signature of Signing Officer or Director

Date