

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90370 035 ***150.00

14004566



02192004 Chg-P CR2E034 (10/03)

4. FEI Number **65-1107940** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BROWN, ROBERT Z
923 SW 101ST WAY
PEMBROKE PINES, FL 33025-5572

(Deceased see attached)

7. Name and Address of New Registered Agent

Name **Brown, Jeannette B.**
Street Address (P.O. Box Number is Not Acceptable)
923 S. W. 101 Way
City **Pembroke Pines, FL** Zip Code **33025-5572**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Jeannette B. Brown* 04/15/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **BROWN, JEANNETTE B**
STREET ADDRESS **923 SW 101ST WAY**
CITY-ST-ZIP **PEMBROKE PINES, FL 330255572**

TITLE **VD** ☐ Delete
NAME **JOHNSON, C. LYNNETTE**
STREET ADDRESS **4746 PINE ACRES COURT**
CITY-ST-ZIP **DUNWOODY, GA 303385572**

TITLE **SD** ☐ Delete
NAME **NORWOOD, SHERYLL W**
STREET ADDRESS **6200 29TH ST. SOUTH**
CITY-ST-ZIP **ST. PETERSBURG, FL 337125572**

TITLE **D** ☐ Delete
NAME **BROWN, ROBERT Z**
STREET ADDRESS **923 SW 101ST WAY**
CITY-ST-ZIP **PEMBROKE PINES, FL 330255572**

TITLE **D** ☐ Delete
NAME **BRYANT, FREDONIA H**
STREET ADDRESS **869 BARBER STREET**
CITY-ST-ZIP **SEBASTIAN, FL 32958**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP **Dunwoody, GA 30338**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP **St. Petersburg, FL 33712**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP **(Deceased July 26, 2003)**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 supplemental 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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE *Jeannette B. Brown* Jeannette B. Brown 04/15/04 954-433-4417/8171
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

See attachment: (1)

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#P01000051432

death certificate (1267x1707x24b.jpeg)