

**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

FILED

04 FEB -9 AM 9:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P01000051701  
1. Entity Name  
MARY ANN'S HOME MAINTENANCE, INC.



Principal Place of Business: 101 SE 2ND AVE, CAPE CORAL, FL 33990  
Mailing Address: 101 SE 2ND AVE, CAPE CORAL, FL 33990

**DO NOT WRITE IN THIS SPACE**



01082004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-1113254	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
VARNER, JAMES G  
101 SE 2ND AVE.  
CAPE CORAL, FL 33990

**DO NOT WRITE IN THIS SPACE**

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: *James G. Varner, Sr.* (NOTE: Registered Agent signature required when reinstating) DATE: Feb 5, 04

**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	P
NAME	VARNER, JAMES G SR
STREET ADDRESS	101 SE 2ND AVE
CITY-ST-ZIP	CAPE CORAL, FL 33990
TITLE	VP
NAME	VARNER, MARYANN
STREET ADDRESS	101 SE 2ND AVE
CITY-ST-ZIP	CAPE CORAL, FL 33990
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

300028650039  
02/12/04--01037--008 \*\*163.75

**DO NOT WRITE IN THIS SPACE**

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: *James G. Varner, Sr.* James G. Varner, SR 1/22/04 1-239-671-8622  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #