

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000052194

FILED  
Jan 06, 2004  
Secretary of State

Entity Name: FLORIDA UNLIMITED INCENTIVES, INC.

## Current Principal Place of Business:

16039 HARBAR OAKS DR.  
MONTVERDE, FL 347560007

## New Principal Place of Business:

16039 HARBAR OAKS DR.  
MONTVERDE, FL 347563007

## Current Mailing Address:

16039 HARBAR OAKS DR.  
MONTVERDE, FL 347560007

## New Mailing Address:

16039 HARBAR OAKS DR.  
MONTVERDE, FL 347563007

FEI Number: 07-1693315

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KATZ, LAWRENCE H  
341 N. MAILTAND AVE., SUITE 120  
MAITLAND, FL 32751 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: P/S ( ) Delete  
Name: WEBB, RITA L  
Address: 16039 HARBAR OAKS DRIVE  
City-St-Zip: MONTVERDE, FL 347560007 US

Title: V/T ( ) Delete  
Name: WEBB, ROBERT T  
Address: 16039 HARBAR OAKS DRIVE  
City-St-Zip: MONTVERDE, FL 347560007 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/S (X) Change ( ) Addition  
Name: DE VOCHT, RITA L  
Address: 12447 MURARO GROVE ROAD  
City-St-Zip: GROVELAND, FL 34736 US

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: ROBERT T. WEBB

V/T

01/06/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date