

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000053240

FILED
Feb 18, 2004
Secretary of State

Entity Name: PETE & SHORTY'S OF TAMPA, INC.

Current Principal Place of Business:

26133 US HWY. 19 N., STE. 100
CLEARWATER, FL 337632019

New Principal Place of Business:

Current Mailing Address:

26133 US HWY. 19 N., STE. 100
CLEARWATER, FL 337632019

New Mailing Address:

FEI Number: 59-3725265

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KIEFER, NEIL G
26133 US HWY. 19 N., STE. 100
CLEARWATER, FL 337632019

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: PD () Delete
Name: USILTON, LEE
Address: 136 MIDWAY ISLAND
City-St-Zip: CLEARWATER, FL 33767

Title: D () Delete
Name: JOHNSON, DENNIS
Address: 277 ABERDEEN ST.
City-St-Zip: DUNEDIN, FL 34698

Title: D () Delete
Name: DROSTE, EDWARD C
Address: 20 MIDWAY ISLAND
City-St-Zip: CLEARWATER, FL 33767

Title: ST () Delete
Name: CLARK, BRUCE W
Address: 2125 PINNACLE CIRCLE S
City-St-Zip: PALM HARBOR, FL 34684

Title: D () Delete
Name: KIEFER, NEIL G
Address: 7296 BRYCE POINT
City-St-Zip: PINELLAS PARK, FL 33782

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BRUCE W. CLARK

ST

02/18/2004

Electronic Signature of Signing Officer or Director

_____ Date