2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000062049

City-St-Zip:

MELBOURNE, FL 32935

FILED Sep 17, 2004 Secretary of State

				,	
Entity Nar	me: LAZY-IF	PRODUCTIONS, INC.			
Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
7830 ELLIS RD MELBOURNE, FL 32904				215 AUGUSTA WAY MELBOURNE, FL 32940	
Current Mailing Address:			New Mailing Add	New Mailing Address:	
7830 ELLIS RD MELBOURNE, FL 32904			215 AUGUSTA WAY MELBOURNE, FL 32940		
FEI Number:	: 59-3734437	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Addres	Name and Address of New Registered Agent:	
KRAUSE, JOHN P 7830 ELLIS RD MELBOURNE, FL 32904				KRAUSE, JOHN P 215 AUGUSTA WAY MELBOURNE, FL 329404	
	named entity of Florida.	submits this statement for the	purpose of changing its regist	ered office or registered agent, or both,	
SIGNATURE: JOHN P KRAUSE				09/17/2004	
	Electro	nic Signature of Registered Ag	gent	Date	
		93(2)(b), F.S., the corporation did n	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHAI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D (KRAUSE, JOH 2373 EDEN PA MELBOURNE,	ARK DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	KRAUSE, BET 205 BALLYSH) Delete TE E ANNON ST #501 BEACH, FL 32951	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	D (KRAUSE, MIC 2373 EDEN PA		Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: JOHN P KRAUSE D 09/17/2004