2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Sep 22, 2004 08:00 AM Secretary of State

DOCUMENT # P01000109730 1. Entity Name C & C UNDERHILL, INC.						Secretary o	f Stat
27695 SW M	e of Business IARTIN HWY E, FL 34974	Mailing Address PO BOX 888 BRANDON, FL 33509	-0888			<u>.</u>	
2. Principal P	flace of Business	3. Mailing Address					
Suite, Apt #, etc.		Suite, Apt. #, etc		08162004	Chg-P	CR2E034 (10/03)	
City & State		City & State		4. FEI Numb	er PPLICABLE		oplied For ot Applicable
Zip	Country	Zıp	Country	5. Certificate	of Status Desired	S8.75 Add	ditional
	6. Name and Address of Curren	Registered Agent	Name	7. Name and	Address of New	Registered Agent	
TOMPKINS, H. CHRISTOPHER 11 1760 S KINGS AVE : BRANDON, FL 33509-6216				Street Address (P.O. Box Number is Not Acceptable)			
			Gity			FL Zip Cod	e
8. The above the obligat	named entity submits this statement fi ilons of registered agent.	or the purpose of changing its	registered office or reg	gistered agent, or bo	oth, in the State of F		and accept
SIGNATURE.	Signature, typed or printed name of registered agen	t and title if applicable (NO)	E Registered Agent signature re	equired when rainstating)	<u> </u>	DATE	
1	LE NOW!!! FEE IS \$150.00 ue by September 8, 2004	9. Election Campa Trust Fund Con	aign Financing tribution.	\$5.00 May Be Added to Fees	In accordance corporation di	with s. 607.193(2)(b), d not receive the prior	F.S., the notice.
10.	OFFICERS AND	D DIRECTORS	11.	ADDITIONS	/CHANGES TO OF	FICERS AND DIRECTOR	S IN 11
NAME STREET ADDRESS CITY-ST-ZIP	DST UNDERHILL, CHARLES E 27695 SW_MARTIN HWY OKEECHOBEE, FL 34974	☐ Delele	TITLE HAME STREET ADDRESS CITY-ST-ZIP		U00 09/22/	□ Change 000172460 04-80002-005	□ Addition 150.00
FITUE NAME STREET ADDRESS CITY-ST-ZIP	V UNDERHILL, RYAN C 27695 SW MARTIN HWY OKEECHOBEE, FL 34974	☐ Delete	TILE NAME STREET ADDRESS GITY-ST-ZIP			☐ Change	Addition
TITLE NAME. STREET ADDRESS CITY-ST-ZIP	·	☐ Delete	TITLE NAME STREET ADORESS CITY-ST-ZIP			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Detele	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
12. I hereby indicates of the co-changed		C. Unclockel	e e	in Section 119.07(3 e the same legal effe er 607, Florida Statul	(i), Florida Statute: ct as if made unde es; and that my na	s. I further certify that the istroath; that I am an office me appears in Block 10 c	information r or director r Block 11 if
1	SIGNATURE AND TYPED OF	PRINTED NAME OF SIGNING OFFICE	R OR DIRECTOR		Date	Daytime Phone #	