


FILED

May 03, 2004 08:00 AM  
Secretary of State

2004 FOR PROFIT CORPORATION  
ANNUAL REPORT

<b>DOCUMENT # P01000112863</b>	
1. Entity Name UNCLE AL'S SEASONAL RETAIL, INC.	

Principal Place of Business 7200 GREEN ACRE LN FT MYERS, FL 33912	Mailing Address P.O. BOX 61288 FORTMYERS, FL 33905-1288
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04272004 No Chg-P CR2E004 (10/03)

4. FEI Number 85-1151525	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required



8. Name and Address of Current Registered Agent

PARRISH, WHITE, LAWHON & ADLER, P.A.  
3431 PINE RIDGE RD, STE 101  
NAPLES, FL 34109

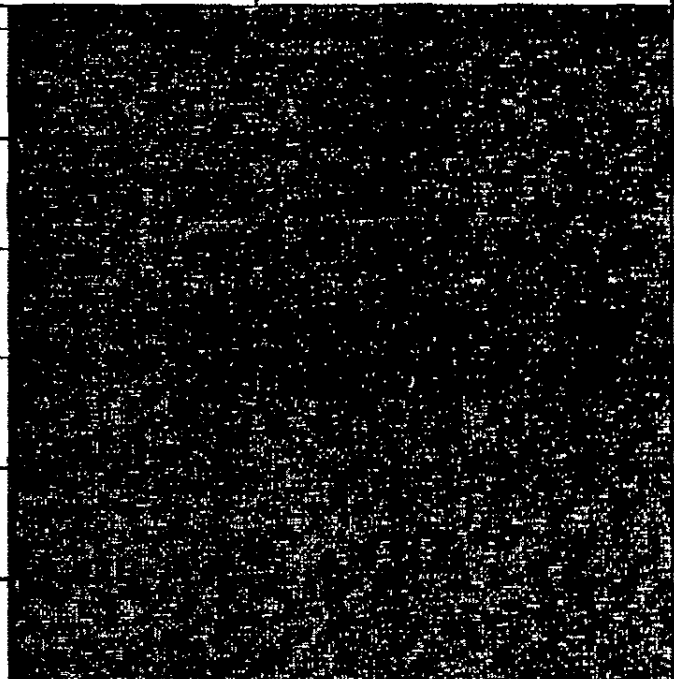
9. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when retitling)

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$650.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fee	DATE 05/04/04-80095-008 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MUELLER, AL 7200 GREEN ACRE W. FORT MYERS, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VDP MUELLER, SUZANNE 7200 GREEN ACRE W. FORT MYERS, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	



12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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: *Suzanne Mueller* Suzanne Mueller V-President  
Date: 4/29/04 239-437-5911