## 2004 FOR PROFIT CORPORATION

## ANNUAL REPORT FILED **DOCUMENT # P01000116951** Mar 08, 2004 08:00 AM 1. Entity Name **Secretary of State** C-TOW, INC. Principal Place of Business Mailing Address 5054 TAMIAMI TRAIL P. O. BOX 494133 PORT CHARLOTTE, FL 33980 PORT CHARLOTTE, FL 33949 03052004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-1158268 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 8. Name and Address of Current Registered Agent BARNOSKY, JOHN E DO NOT WRITE 21551 EDGEWATER DRIVE PORT CHARLOTTE, FL 33952 IN THIS SPACE 8. 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 reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE BARNOSKY, JOHN E NAME STREET ADDRESS 21551 EDGEWATER DRIVE U00000080923 CITY-ST-ZIP PORT CHARLOTTE, FL 33952 03/08/04-80129-011 150.00 TITLE MAME BARNOSKY, JUDITH H STREET ADDRESS 21551 EDGEWATER DRIVE PORT CHARLOTTE, FL 33952 CITY-ST-ZIP mF NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 3*1111*

12. I hereby certify that the information supplied with this filling does not qualify 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 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:

NAME STREET ADDRESS CITY-ST-ZIP