

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000027678

FILED  
Apr 30, 2004  
Secretary of State

Entity Name: YOUR NATURAL PET, INC.

## Current Principal Place of Business:

1208 COUNTY ROAD #1  
DUNEDIN, FL 34698

## New Principal Place of Business:

## Current Mailing Address:

1208 COUNTY ROAD #1  
DUNEDIN, FL 34698

## New Mailing Address:

FEI Number: 01-0632154      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MYERS, K. MINTIE  
14132 DEER TRAIL DRIVE  
HUDSON, FL 34667

## 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: DP ( ) Delete  
Name: MYERS, K. MINTIE  
Address: 14132 DEER TRAIL DRIVE  
City-St-Zip: HUDSON, FL 34667

Title: DVST ( ) Delete  
Name: BRADLEY, JACQUELINE  
Address: 3629 COUNTRY POINTE PLACE  
City-St-Zip: PALM HARBOR, FL 34684

Title: D ( ) Delete  
Name: MYERS, RONALD L  
Address: 14132 DEER TRAIL DRIVE  
City-St-Zip: HUDSON, FL 34667

Title: D ( ) Delete  
Name: BRADELY, BOB  
Address: 3629 COUNTRY POINTE PLACE  
City-St-Zip: PALM HARBOR, FL 34684

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DVST (X) Change ( ) Addition  
Name: BRADLEY, JACQUELINE  
Address: 14132 DEER TRAIL DRIVE  
City-St-Zip: HUDSON, FL 34667

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

Title: D (X) Change ( ) Addition  
Name: BRADELY, BOB  
Address: 14132 DEER TRAIL DRIVE  
City-St-Zip: HUDSON, FL 34667

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: RONALD L. MYERS

D

04/30/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date