

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000040672

Entity Name: MINK PROPERTIES, INC.

FILED  
May 04, 2004  
Secretary of State

## Current Principal Place of Business:

9425 CALLE ALTA  
NEW PORT RICHEY, FL 34655

## New Principal Place of Business:

## Current Mailing Address:

9425 CALLE ALTA  
NEW PORT RICHEY, FL 34655

## New Mailing Address:

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HALLISEY, MARK  
9425 CALLE ALTA  
NEW PORT RICHEY, FL 34655

## 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: PD ( ) Delete  
Name: HALLISEY, IRENE  
Address: 9425 CALLE ALTA  
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: TD ( ) Delete  
Name: PORAKISCHWILI, NATALIE  
Address: 9621 BRASSIE COURT  
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: SD ( ) Delete  
Name: HALLISEY, KRISTINE  
Address: 8513 NEWTON DRIVE  
City-St-Zip: PORT RICHEY, FL 34668

Title: VD ( ) Delete  
Name: HALLISEY, MARK  
Address: 9425 CALLE ALTA  
City-St-Zip: NEW PORT RICHEY, FL 34655

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: MARK HALLISEY

PD

05/04/2004

Electronic Signature of Signing Officer or Director

Date