

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

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

DOCUMENT # P02000047804

1. Entity Name
FRONT PORCH PROPERTIES, INC.



Principal Place of Business
**8929 WEST EMBERGLOW LANE
CRYSTAL RIVER, FL 34428**

Mailing Address
**8929 WEST EMBERGLOW LANE
CRYSTAL RIVER, FL 34428**



03172004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
01-0681954

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HALE, DEBORAH L
8929 WEST EMBERGLOW LN
CRYSTAL RIVER, FL 34428**

**DO NOT WRITE
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 Deborah L. Hale Deborah L. Hale 3/17/04
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME JOHNSON, HENRY D
STREET ADDRESS 8929 WEST EMBERGLOW LANE
CITY-ST-ZIP CRYSTAL RIVER, FL 34428

TITLE VSTD
NAME HALE, DEBORAH L
STREET ADDRESS 8929 WEST EMBERGLOW LANE
CITY-ST-ZIP CRYSTAL RIVER, FL 34428

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U00000093425
03/22/04-80016-022 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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: Deborah L. Hale Deborah L. Hale 3/17/04 (352) 563-6680
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #