

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000057457

FILED  
Apr 19, 2004  
Secretary of State

Entity Name: PROMERCITY, INC.

## Current Principal Place of Business:

5216 HOPE LANE  
SPRING HILL, FL 34606

## New Principal Place of Business:

12858 U.S. HIGHWAY 301  
DADE CITY, FL 33525

## Current Mailing Address:

5216 HOPE LANE  
SPRING HILL, FL 34606

## New Mailing Address:

12858 U.S. HIGHWAY 301  
DADE CITY, FL 33525

FEI Number: 41-2044452

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BEDELL, PETER  
5216 HOPE LANE  
SPRING HILL, FL 34606

## 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: PVST ( ) Delete  
Name: BEDELL, PETER  
Address: 5216 HOPE LANE  
City-St-Zip: SPRING HILL, FL 34606

Title: PVST ( ) Delete  
Name: BEDELL, PETER  
Address: 5216 HOPE LANE  
City-St-Zip: SPRING HILL, FL 34606

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VST (X) Change ( ) Addition  
Name: BEDELL, PETER  
Address: 5216 HOPE LANE  
City-St-Zip: SPRING HILL, FL 34606

Title: P (X) Change ( ) Addition  
Name: PAULTER, THOMAS  
Address: 4289 CASTLE AVENUE  
City-St-Zip: SPRING HILL, FL 34609

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: PETER BEDELL

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04/19/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date