2004 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # P02000101283 1. Entity Name THE MARKET ON LONGBOAT KEY, INC. Principal Place of Business Mailing Address 7012 PALM DRIVE 7012 PALM DRIVE LONGBOAT KEY, FL 34228 LONGBOAT KEY, FL 34228 No Chg-P CR2E034 (10/03) 01192004 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 22-3872729 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HLYWA, ANDREW M DO NOT WRITE 7012 PALM DRIVE LONGBOAT KEY, FL 34228 IN THIS SPACE 3. 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, typed or printed name of registered agent and titls if applicable. (NOTE, Registered Agent signature required when reinstating) U00000033103 FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be 02/05/04-80031-002 150.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS TITLE HLYWA, ANDREW M NAME STREET ADDRESS 7012 PALM DRIVE CITY-ST-7IP LONGBOAT KEY, FL 34228 DI LORENZO, DAWN NAME STREET ADDRESS 7012 PALM DRIVE LONGBOAT KEY, FL 34228 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE STREET ADDRESS CITY-ST-ZIP

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 ampowered.

SIGNATURE: A

TITLE

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

ANDOW M. HUWA

Ed. 22004 941-383-48

FILED

Feb 04, 2004 08:00 AM