2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000106567

Entity Name: TOOTER ENTERPRISES, INC.

FILED Sep 09, 2004 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

5460 TROPICAIRE BLVD 5460 TROPICAIRE BLVD NORTH PORT, FL 34287 NORTH PORT, FL 34286

Current Mailing Address: New Mailing Address:

5460 TROPICAIRE BLVD 5460 TROPICAIRE BLVD NORTH PORT, FL 34287 NORTH PORT, FL 34286

FEI Number: 65-1111037 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FRISCH, LARRY FRISCH, LARRY 5460 TROPICAIRE BLVD 5460 TROPICAIRE BLVD NORTH PORT, FL 34287 US US NORTH PORT, FL 34286

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: 09/09/2004

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

() Delete Title: (X) Change () Addition

FRISCH, LARRY FRISCH, LARRY Name: Name: 5460 TROPICAIRE BLVD 5460 TROPICAIRE BLVD Address: Address: City-St-Zip: NORTH PORT, FL 34287 City-St-Zip: NORTH PORT, FL 34286

() Delete Title: Title: (X) Change () Addition

Name: FRISCH, PAMELA Name: FRISCH, PAMELA 5460 TROPICAIRE BLVD Address: 5460 TROPICAIRE BLVD Address: NORTH PORT, FL 34287 NORTH PORT, FL 34286 City-St-Zip: 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: PAMELA K. FRISCH DIRE 09/09/2004