

2004 FOR PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**Apr 12, 2004 8:00 am**  
**Secretary of State**

04-12-2004 90246 001 \*\*\*150.00

<b>DOCUMENT # P02000121296</b>	
1. Entity Name <b>RAYDIANCE TANNING CENTER #4 INC.</b>	

Principal Place of Business <b>803 SCENIS HEIGHTS RD BRANDON, FL 33511-7731</b> <i>901 LITHIA PINECREST BRANDON FL 33511</i>	Mailing Address <b>803 SCENIS HEIGHTS RD BRANDON, FL 33511-7731</b>
--	--

**DO NOT WRITE IN THIS SPACE**



04092004 No Chg-P CR2E034 (10/03)

4. FEI Number <b>56-2306306</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent  <b>MCDERMOTT, MICHAEL J 791 W LUMSDEN RD BRANDON, FL 33511</b>
---

**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 \_\_\_\_\_ (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. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
---	--

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HANCOCK, KEITH S 803 SCENIS HEIGHTS RD BRANDON, FL 33511
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROSSITER, STEVEN D 11120 CASA LOMA DR RD RIVERVIEW, FL 33569
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE 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:**  **4-4-04**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #