


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 23, 2004 08:00 AM
Secretary of State

DOCUMENT # P02000129811	
1. Entity Name PASSING TIMES, INC.	

Principal Place of Business 707 19 AVE PALMETTO, FL 34221	Mailing Address 707 19 AVE PALMETTO, FL 34221
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DO NOT WRITE IN THIS SPACE

5. Name and Address of Current Registered Agent LAKE, JIMMY K 707 19 AVE PALMETTO, FL 34221	DO NOT WRITE IN THIS SPACE
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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reissuing)

FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000170609 08/23/04-80002-024 550.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DPT LAKE, JIMMY K 707 19 AVE PALMETTO, FL 34221
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVS LAKE, DEBORAH L 707 19 AVE PALMETTO, FL 34221
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**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: Jimmy K. Lake, PRESIDENT **8-10-04** 941-729-4892

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone