

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 09, 2004 8:00 am
Secretary of State

09-09-2004 90005 017 ***558.75

DOCUMENT # P03000003403

1. Entity Name
CLAY BENNETT SURFBOARDS, INC.



Principal Place of Business
**1089 ATLANTIC BLVD 29
ATLANTIC BEACH, FL 32233**

Mailing Address
**1089 ATLANTIC BLVD 29
ATLANTIC BEACH, FL 32233**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

08312004

Chg-P

CR2E034 (10/03)

4. FCI Number

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BENNETT, CLAY
1089 ATLANTIC BLVD 29
ATLANTIC BEACH, FL 32233**

Name

Street Address (P.O. Box Number's Not Acceptable)

City

FL

Zip Code

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

Signature of officer or agent of registered agent and the filer (check)

Signature of registered agent (signature required when changing)

Date

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY ST ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY ST ZIP	☐ Change	☒ Addition
	P. D. Clay Bennett	1205 19th St. N.	Jacksonville Beach FL 32250		
	V. T. S. Sherry Bennett	1205 19th St N	Jacksonville Beach FL 32250		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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 another like empowered.

SIGNATURE:

Clay D Bennett
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/7/04