## 2004 FOR PROFIT CORPORATION

## ANNUAL REPORT

Apr 30, 2004 8:00 am Secretary of State DOCUMENT # P03000005251 04-30-2004 90242 045 \*\*\*150.00 1. Entity Name SYLVIA P. RUSCHE' INSURANCE AGENCY, INC. Principal Place of Business Mailing Address 150 2ND AVENUE 150 2ND AVENUE ST. PETERSBURG, FL 33702 ST. PETERSBURG, FL 33702 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01062004 CR2E034 (10/03) 650 SUITE City & State City & State 4. FEI Number Applied For 06-1671826 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired <u> 33701</u> Fee Required <u>33701</u> -6.-Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RILEY, STEVEN P ESQ. Street Address (P.O. Box Number is Not Acceptable) 4805 W. LAUREL STREET **SUITE 230** TAMPA, FL 33607 City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. ・ ・ 「真け・r へOFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Delete TITLE ☐ Addition TITLE Change RUSCHE', SYLVIA P NAME NAME STREET ADDRESS 120 2ND AVENUE STREET ADDRESS 33701 CITY-ST-ZIP ST. PETERSBURG, FL 33702 CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition VINES, JESSICA C NAME NAME STREET ADDRESS STREET ADDRESS 120 2ND AVENUE 33701 CITY-ST-7IP ST. PETERSBURG, FL 33702 CITY-ST-7IP ☐ Addition TITLE ☐ Delete TITLE ☐ Change NAME RUSCHE', SYLVIA P NAME STREET ADDRESS 120 2ND AVENUE STREET ADDRESS 33701 CITY-ST-ZIP ST. PETERSBURG, FL 33702 CITY-ST-ZIP TITLE ☐ Delete TITLE -Change ☐ Addition RUSCHE', SYLVIA P NAME NAME STREET ADDRESS 120 2ND AVENUE STREET ADDRESS 33701 CITY-ST-ZIP ST. PETERSBURG, FL 33702 CITY-ST-ZIP TITLE CHMN TITLE Change ☐ Addition ☐ Delete RUSCHE', SYLVIA P NAME STREET ADDRESS 120 2ND AVENUE STREET ADDRESS CITY-ST-ZIP ST. PETERSBURG, FL 33702 🛴 CITY-ST-ZIP ☐ Delete TITLE ☐ Addition 44' 5" 4 2 6 A NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP \*\*\* 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 empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #