2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000008751

FILED Aug 09, 2004 Secretary of State

Entity Name: CHARLOTTE AREA BUSINESS ALLIANCE, INCORPORATED

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

779 TAMIAMI TRAIL 2150 TAMIAMI TRAIL

PORT CHARLOTTE, FL 33953 UNIT 12 #176

PORT CHARLOTTE, FL 33948

Current Mailing Address: New Mailing Address:

779 TAMIAMI TRAIL 2150 TAMIAMI TRAIL

PORT CHARLOTTE, FL 33953 UNIT 12 #176

PORT CHARLOTTE, FL 33948

FEI Number: 27-0042931 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:

WELCHMAN, THOMAS E MORGAN, RON E 1825 TAMIAMI TRAIL 16166 ARCARO AVE

PORT CHARLOTTE, FL 33954

PORT CHARLOTTE, FL 33954 US

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: RON E. MORGAN 08/09/2004

> 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

US

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

WELCHMAN, THOMAS E Name: Name: MORGAN, RON E 1825 TAMIAMI TRAIL 16166 ARCARO AVE Address: Address:

City-St-Zip: PORT CHARLOTTE, FL 33954 City-St-Zip: PORT CHARLOTTE, FL 33954

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

PUCCIO, SAM Name: Name: 1200 RETTA ESPLANADE Address: Address: PUNTA GORDA, FL 33950 City-St-Zip: City-St-Zip:

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

MORGAN, RON Name: Name: 779 TAMIAMI TRAIL Address: Address: City-St-Zip: PORT CHARLOTTE, FL 33953 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: RON E. MORGAN **PRES** 08/09/2004