

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000015609

FILED  
Sep 08, 2004  
Secretary of State

Entity Name: GEBE'S SPORTS CAFE, INC

**Current Principal Place of Business:**

9201 66TH STREET  
PINELLAS PARK, FL 33781

**New Principal Place of Business:**

**Current Mailing Address:**

9201 66TH STREET  
PINELLAS PARK, FL 33781

**New Mailing Address:**

FEI Number: 16-1652960      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BRITTON, GAIL  
8207 RUGBY COURT  
HUDSON, FL 34667      US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

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:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: MRS ( ) Change (X) Addition  
Name: BRITTON, GAIL  
Address: 8207 RUGBY COURT  
City-St-Zip: HUDSON, FL 34667

Title: MR ( ) Change (X) Addition  
Name: BRITTON, EDWARD S  
Address: 8207 RUGBY COURT  
City-St-Zip: HUDSON, FL 34667

Title: MR ( ) Change (X) Addition  
Name: BRITTON, EDWARD J  
Address: 7204 POTOMAC DR  
City-St-Zip: PORT RICHEY, FL 34668

Title: MR ( ) Change (X) Addition  
Name: BRITTON, BRADLEY  
Address: 8207 CLOVER HILL LOOP  
City-St-Zip: HUDSON, FL 34667

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: GAIL BRITTON

MRS

09/08/2004

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date