

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P03000016244

1. Entity Name
STEPHEN MANCUSO, INC.



Principal Place of Business
3331 SUMMIT BLVD., #22
PENSACOLA, FL 32503

Mailing Address
3331 SUMMIT BLVD., #22
PENSACOLA, FL 32503

2. Principal Place of Business
7645 Northpointe Drive
Suite, Apt. #, etc.

3. Mailing Address
7645 Northpointe Drive
Suite, Apt. #, etc.

City & State
Pensacola FL

Zip 32514 Country Escambia

City & State
Pensacola FL 32514

Zip 32514 Country Escambia

04292004 Chg-P CR2E034 (10/03)

4. FEI Number
810592750 Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MANCUSO, STEPHEN
3331 SUMMIT BLVD., #22
PENSACOLA, FL 32503

Name

Street Address (P.O. Box Number is 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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME MANCUSO, STEPHEN
STREET ADDRESS 3331 SUMMIT BLVD., #22
CITY-ST-ZIP PENSACOLA, FL 32503

Delete

TITLE P
NAME Mancuso, Stephen
STREET ADDRESS 7645 Northpointe Drive
CITY-ST-ZIP Pensacola FL 32514

Change Addition

TITLE D
NAME MANCUSO, ALMA
STREET ADDRESS 3331 SUMMIT BLVD., #22
CITY-ST-ZIP PENSACOLA, FL 32503

Delete

TITLE V
NAME Mancuso, Alma
STREET ADDRESS 7645 Northpointe Drive
CITY-ST-ZIP Pensacola FL 32514

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

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: *Alma R Mancuso* Alma R Mancuso, Vice Pres. Apr 29, 2004 850-471-1381
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #