

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000018448

FILED  
Apr 26, 2004  
Secretary of State

Entity Name: EVENT FORGE, INC.

## Current Principal Place of Business:

OCTAVIA STREET  
ALVA, FL 33920

## New Principal Place of Business:

3211 17TH STREET W  
LEHIGH ACRES, FL 33971 US

## Current Mailing Address:

OCTAVIA STREET  
ALVA, FL 33920

## New Mailing Address:

P.O.BOX 243  
LEHIGH ACRES, FL 33970 US

FEI Number: 43-1999049

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BOWERS, ROBERT L  
23 COLORADO ROAD  
LEHIGH ACRES, FL 33936

## Name and Address of New Registered Agent:

BECKWITH, ROBERT M  
3211 17TH STREET W  
LEHIGH ACRES, FL 33971 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: ROBERT BECKWITH

04/26/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: THOMSON, CHRISTOPHER  
Address: PO BOX 159  
City-St-Zip: LEHIGH ACRES, FL 33970

Title: DT ( ) Delete  
Name: DUNN, SHARON  
Address: PO BOX 159  
City-St-Zip: LEHIGH ACRES, FL 33970

Title: S ( ) Delete  
Name: DUNN, HEATHER A  
Address: PO BOX 159  
City-St-Zip: LEHIGH ACRES, FL 33970

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: BECKWITH, ROBERT M JR  
Address: 3211 17TH STREET  
City-St-Zip: LEHIGH ACRES, FL 33971 US

Title: DT (X) Change ( ) Addition  
Name: DUNN, SHARON  
Address: P.O.BOX 243  
City-St-Zip: LEHIGH ACRES, FL 33970 US

Title: S (X) Change ( ) Addition  
Name: DUNN, HEATHER A  
Address: PO BOX 243  
City-St-Zip: LEHIGH ACRES, FL 33970 US

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: ROBERT BECKWITH JR

DP

04/26/2004

Electronic Signature of Signing Officer or Director

Date