

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000044394

FILED
Mar 19, 2004
Secretary of State

Entity Name: TOES IN THE SAND, INC.

Current Principal Place of Business:

2202 N. WESTSHORE BLVD.
5TH FLOOR
TAMPA, FL 33607 US

New Principal Place of Business:

Current Mailing Address:

9596 123RD WAY
SEMINOLE, FL 33772 US

New Mailing Address:

1092 POINT SEASIDE DR.
P.O. BOX 1143
CRYSTAL BEACH, FL 34681 US

FEI Number: 37-1465567

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAY, ROBIN E
9596 123RD WAY
SEMINOLE, FL 33772 US

Name and Address of New Registered Agent:

MAY, ROBIN E
1092 POINT SEASIDE DR.
P.O. BOX 1143
CRYSTAL BEACH, FL 34681 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: ROBIN E. MAY

03/19/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MAY, PETER M
Address: 9596 123RD WAY
City-St-Zip: SEMINOLE, FL 33772 US

Title: VP () Delete
Name: MAY, ROBIN E
Address: 9596 123RD WAY
City-St-Zip: SEMINOLE, FL 33772 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MAY, PETER M
Address: 1092 POINT SEASIDE DR/PO BOX 1143
City-St-Zip: CRYSTAL BEACH, FL 34681 US

Title: VP (X) Change () Addition
Name: MAY, ROBIN E
Address: 1092 POINT SEASIDE DR/PO BOX 1143
City-St-Zip: CRYSTAL BEACH, FL 34681 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: ROBIN E. MAY

VP

03/19/2004

Electronic Signature of Signing Officer or Director

Date