

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90249 012 ***158.75

DOCUMENT # P03000047882	
1. Entity Name STROUSE'S SERVICES, INC.	

Principal Place of Business 307 PITTSBURGH DRIVE JUPITER FL 33458	Mailing Address 307 PITTSBURGH DRIVE JUPITER FL 33458
---	---

34030000



MOORE CR2E034 (11/03)

2. Principal Place of Business 307 Pittsburgh Dr.	3. Mailing Address 307 P. Hsburgh Dr
Suite, Apt. #, etc.	Suite, Apt. #, etc.

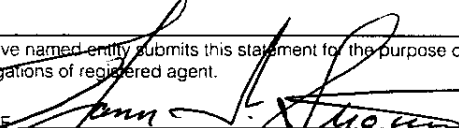
City & State Jupiter, FL	City & State Jupiter FL
Zip 33458	Country USA
Zip 33458	Country USA

4. FEI Number 15-1187265	Applied For ☐ Not Applicable
------------------------------------	--

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

6. Name and Address of Current Registered Agent KEMPE, JOSEPH C ESQ JOSEPH C KEMPE PA 941 NORTH HIGHWAY A1A JUPITER FL 33477	
--	--

7. Name and Address of New Registered Agent Name Jann T. Strouse Street Address (P.O. Box Number is Not Acceptable) 307 Pittsburgh Drive City Jupiter FL Zip Code 33458	
---	--

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 	DATE 4/15/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)	

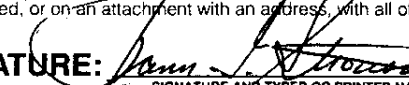
FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STROUSE, JANN T 307 PITTSBURGH DRIVE JUPITER FL 33458 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BALLENGER, DONNA MARIE 14059 MARRIAN AVENUE JUPITER FL 33458 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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: 	Jann T. Strouse	4/15/04	561-262-0788
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	Daytime Phone #