


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90456 012 ***150.00

DOCUMENT # P03000048011 1. Entity Name FLOE HOLDINGS, INC.					
Principal Place of Business 13709 PROGRESS BLVD ALACHUA, FL 32615			Mailing Address 13709 PROGRESS BLVD ALACHUA, FL 32615		
2. Principal Place of Business 13709 PROGRESS BLVD. Suite, Apt. #, etc. BOX 14			3. Mailing Address 13709 PROGRESS BLVD. Suite, Apt. #, etc. BOX 14		
City & State ALACHUA, FL			City & State ALACHUA, FL		
Zip 32615		Country USA		4. FEI Number 55-0822917	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent F&L CORP. 200 LAURA ST N JACKSONVILLE, FL FL322-02			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City JACKSONVILLE FL Zip Code 32202		
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: _____ (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. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GILSON, PETER 13709 PROGRESS BLVD ALACHUA, FL 32615	<input type="checkbox"/> Delete <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 13709 PROGRESS BLVD., BOX 14			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KRBEC, JERRY 13709 PROGRESS BLVD ALACHUA, FL 32615	<input type="checkbox"/> Delete <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 13709 PROGRESS BLVD., BOX 14			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GRIFFIN, RICHARD A 13709 PROGRESS BLVD ALACHUA, FL 32615	<input type="checkbox"/> Delete <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition CEO 13709 PROGRESS BLVD., BOX 14			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GVOZDIC, NED V 13709 PROGRESS BLVD ALACHUA, FL 32615	<input type="checkbox"/> Delete <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 13709 PROGRESS BLVD., BOX 14			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CARLSON, JOHN D. 13709 PROGRESS BLVD., BOX 14 ALACHUA, FL 32615	<input type="checkbox"/> Delete <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CARLSON, JOHN D. 13709 PROGRESS BLVD., BOX 14 ALACHUA, FL 32615	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> 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: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date 4/30/04		Daytime Phone # 386-418-4397	