
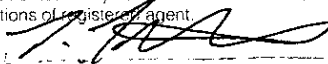
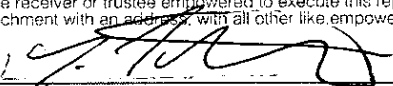


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Sep 14, 2004 8:00 am**  
**Secretary of State**

09-14-2004 90002 003 \*\*\*150.00

DOCUMENT # P03000049652					
1. Entity Name COVERDALE, INC.					
Principal Place of Business 2207 TYRONE BOULEVARD ST. PETERSBURG, FL 33710 US			Mailing Address 2207 TYRONE BOULEVARD ST. PETERSBURG, FL 33710 US		
2. Principal Place of Business 949 TYRONE BOULEVARD Suite, Apt. #, etc. 51		3. Mailing Address 949 TYRONE BOULEVARD Suite, Apt. #, etc.			
City & State ST PETERSBURG, FL		City & State ST PETERSBURG, FL		4. FEI Number 20-0014336	
Zip 33710		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LARSEN, ERIK C 243 W. PARK AVENUE SUITE 201 WINTER PARK, FL 32789			7. Name and Address of New Registered Agent Name: TERRY TATTERSALL Street Address (P.O. Box Number is Not Acceptable): 949 TYRONE BOULEVARD City: ST PETERSBURG FL Zip Code: 33710		
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: 7/26/04					
<b>FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TATTERSALL, TERENCE 10 MOUNT ROAD, ALKRINGTON MIDDLETON, UK M24 1DZ	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TATTERSALL, TERENCE 7044 PEBBLE BEACH LANE SEMINOLE FL 33777	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD TATTERSALL, GILLIAN 10 MOUNT ROAD, ALKRINGTON MIDDLETON, UK M24 1DZ	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TATTERSALL, GILLIAN 7044 PEBBLE BEACH LANE SEMINOLE FL 33777	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TATTERSALL, BLAIN 10 MOUNT ROAD, ALKRINGTON MIDDLETON, UK M24 1DZ	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TATTERSALL, BLAIN 7044 PEBBLE BEACH LANE SEMINOLE FL 33777	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<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:  DATE: 8/26/04					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: _____					