


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90254 032 ***158.75

| | |
|---------------------------------------|---|
| DOCUMENT # P03000066017 |  |
| 1. Entity Name MLW PROPERTIES, INC | |

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|---|---|
| Principal Place of Business 504 WYMORE RD WINTER PARK, FL 32789 | Mailing Address 504 WYMORE RD WINTER PARK, FL 32789 |
|---|---|

24050020

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| 2. Principal Place of Business 2071 Venetian Way Suite, Apt. #, etc. | 3. Mailing Address 2071 Venetian Way Suite, Apt. #, etc. |
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04272004 Chg-P CR2E034 (10/03)

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|--------------------------------|--------------------------------|
| City & State Winter Park FL | City & State Winter Park FL |
| Zip 32789 | Zip 32789 |
| Country USA | Country USA |

| | |
|---|--|
| 4. FEI Number 20-1047302 | <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required | |

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|---|--|
| 6. Name and Address of Current Registered Agent WOOD, MARK L 504 WYMORE RD WINTER PARK, FL 32789 | |
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| 7. Name and Address of New Registered Agent Name Mark L. Wood Street Address (P.O. Box Number is Not Acceptable) 2071 Venetian Way City Winter Park FL Zip Code 32789 | |
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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. ☐ \$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 | DP WOOD, MARK L 504 WYMORE RD WINTER PARK, FL 32789 <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"/> Change <input type="checkbox"/> Addition |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

Please
change
Address:
2071 Venetian Way
Winter Park FL 32789

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: Mark L. Wood 4-26-04 (407)396-3231
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #