

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

03-09-2004 90038 048 ***150.00

03-19-2004 90048 001 ***150.00

**2004 FOR PROFIT CORPORATION
 ANNUAL REPORT**

54020100

DOCUMENT # P03000075371					
1. Entity Name ALFRED CONHAGEN, INC. OF FLORIDA					
Principal Place of Business 2670 EAST 5TH AVE TAMPA, FL 33605			Mailing Address 2670 EAST 5TH AVE TAMPA, FL 33605		
2. Principal Place of Business 2670 E. 5th Ave.			3. Mailing Address SAME AS ABOVE		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State Tampa, FL			City & State		
Zip 33605		Country USA		4. FEI Number 20 008 7825	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
6. Name and Address of Current Registered Agent BEHRENFELD, CRAIG E 601 BAYSHORE BLVD STE 700 TAMPA, FL 33606				7. Name and Address of New Registered Agent	
Name				Street Address (P.O. Box Number is Not Acceptable)	
City				FL Zip Code	
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 _____ Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reappointing) 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	Chairman of the Board Alfred Conhagen, Jr. 10080 Orchid Ridge Lane Bonita Springs, FL 34135 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Corporate Secretary Elaine Rutter 3955 Torrey Pines Blvd. Sarasota, FL 34238 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director John Winand 3852 Spyglass Hill Rd. Sarasota, FL 34238 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Lynne Persing 23D Franklin Lane Staten Island, NY 10306 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President and COO Alton Burns, Jr. 102 Victoria Way Friendswood, TX 77546 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		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)(f), 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: Lynne C. Persing 			3/15/04 732-287-4565 ext 10		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		