2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jun 09, 2004 8:00 am Secretary of State

1. Entity Nam) c	# P0300007			05-05-20	004 90217	010 ***	150.00			
Principal Place	e of Busines	9	Mailing Address				0040	HE10			
1045 COLLIER CTR WAY			1045 COLLIER CTR WA	¥			6644	27519			
SUITE 10 NAPLES, FL 34110			SUITE 10 Naples, FL 34110		en Per						
100 023,12	34110		MARKED, FE 34110				1118 mm 11 m 10a f			1000	
2. Principal Place of Business			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.			04222004	Chg-P	CR2E03	4 (10/03)		
City & State			City & State	City & State			Manau	(D)	\ 	plied For	1
Zip		Country	Zip	Cour	ntry	5 Certificate	of Status Degired		8.75 Add		
									ee Required	1	
	6. Name	and Address of Curren	t Registered Agent	. Name	7. Name and	Address of New	Registered A	gent			
SOUTHWE	EST PRO	ĘESSIONAL SERVI	CES OF S FL, I					•			
13571 MCGREGOR BLVD					Street Address (P.O. Box Numbe	ir is Not Acceptat	de) ek	- Charles Annabel Charles		و ا
#22 FORT MY	ERS. FL	33919					·				
					City			Fi	Zip Code	}	i
D. The share			f :ab		1			FL			
		ty submits this statement tered agent.	for the purpose of changing it	s registel	rea office or register	ed agent, or bot	n, in the State of I	Florida. I am f	amiliar with,	and accept	
01011471100	.										
SIGNATURE.	Signature, types	d or printed name of registered ages	nt and title if applicable. (NO	TE: Register	ed Agent signsture required	when reinstading)		DATE			
FIL After M	É NOW!!! ay 1, 200	FEE IS \$150.00 4 Fee will be \$550	9. Election Campa Trust Fund Cor		ncing \$5.	.00 May Be led to Fees					
10.	1.	OFFICERS AN	D DIRECTORS	11.		. ADDITIONS/	CHANGES TO O	FFICERS AND	DIRECTORS	SIN 11	ł
TITLE ·	Р		☐ Detete	TITE	· .				Change	☐ Addition	
NAME STREET ADDRESS	10070 BC	N, MICHAEL		NAI	Æ EET ADDRESS						
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NAME		N, MARILYN		NA	Æ			•			İ
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CITY-ST-ZIP	PEMBRO	OKE, MA 02359		CIT	Y-ST-ZIP			<u>.</u>			
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CITY-ST-ZIP					Y-ST-ZIP]
12. I hereby indicated	certify that the	ne information supplied work or supplemental report	ith this filing does not qualify to the true and accurate and that apowered to execute this repo	or the ex	emption stated in Se ature shall have the	ection 119.07(3)(same legal effec	i), Florida Statute t as if made unde	s. I further cert er oath; that I a	ily that the k	vormation or director	

SIGNATURE: MALL COMMON MARILYD GOT MAD 5/1/04

BIGNATURE AND TYPED OR PRINTED NAME OF SIGNAND OFFICER ON ORIECTOR

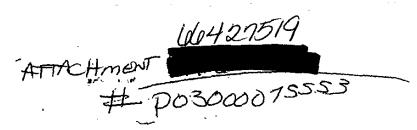
Date

Date

Date

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Deta



You should file this now although it will not be delinquent whill May 1st.

You should file this form, you will receive a reminder. K you still do not file, YOUR

If you fail to file this form, you will receive a reminder. K you still do not file, YOUR

CORPORATION WILL BE DISSOLVED BY THE STATE. HEINSTATEMENT IS The attached form is your: FLORIDA CORPORATION ANNUAL REPORT SIGN THE TAX FORM, MAKE YOUR CHECK FOR \$ 150.00payable to SECRETARY OF STATE and mail to: Division of Corporations, Anaual Reports Section, P.O. Box 1500. Tallahassee, FL 32302-1500 in the enclosed envelope. Return this to us. Date Paid LOTAX TRANSMITTAL MEMO 154 Check \$ 144 E. K. Williams & Co. of Ft. Myers

TTM-20,FRM