## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

505 MUSSETT BAYOU ROAD

SANTA ROSA BEACH, FL 32459 US

Address: City-St-Zip: FILED Apr 25, 2004

DOCUMENT# P03000078107					Secretary of State	
Entity Nai	ne: SOUTH WA	LTON BU	JSINESS CENTER	, INC.		
Current Principal Place of Business:				New Principal Place	New Principal Place of Business:	
	ETT BAYOU RO DSA BEACH, FL		US			
Current Mailing Address:				New Mailing Address	New Mailing Address:	
	ETT BAYOU RO DSA BEACH, FL		US			
FEI Number:	:	FEI Numbe	r Applied For (X)	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address o	Name and Address of New Registered Agent:	
DOWD, JR., JOHN R 285 HIGHWAY 98 EAST SUITE A-2 DESTIN,, FL 32541 US				505 MUSSETT BAYOL	GRANTHAM, ROBERT E SR 505 MUSSETT BAYOU ROAD SANTA ROSA BEACH, FL 32459 US	
	named entity sub of Florida.	omits this	statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: ROBERT E GRANTHAM					04/25/2004	
Electronic Signature of Registered Agent				ent	Date	
Election Car	npaign Financing Tı	rust Fund	Contribution ( ).			
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () De GRANTHAM, ROBI 505 MUSSETT BA' SANTA ROSA BEA	ERT YOU ROAD		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	V () De DOUDNA, KARIN S 505 MUSSETT BA' SANTA ROSA BEA	SUE YOU ROAD		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	S () De			Title: Name:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: ROBERT E GRANTHAM Ρ 04/25/2004