2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 30, 2004 8:00 am
Secretary of State
07-30-2004 90004 041 ***150.00

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1. Entity Name
LOLLIE POP EXPRESS, INC.

Principal Place of Business	Mailing Address
5643 OLD U.S. ROAD MALONE, FL 32445	5643 OLD U.S. ROAD MALONE, FL 32445

44050709

07052004 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
5643 old U.S Rd	5643 old U.S Rd
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Malone (City & State)	City & State: Malone Fl.
Zip: 32445 Country: Jackson	Zip: 32445 Country: Jamie

4. FEI Number: 11-3699915 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ROGERS, WOODROW W
5643 OLD U.S. ROAD
MALONE, FL 32445

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 Janice S. Rogers Secretary 7/26/04
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$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	President Wilson Rogers 5643 old U.S Rd Malone Fl. 32445	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President ☐ Change ☐ Addition Wilson Rogers 5643 old U.S Rd Malone Fl. 32445
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary ☐ Delete Janice S. Rogers 5643 old U.S Rd malone Fl 32445	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer ☐ Change ☐ Addition Janice Rogers 5643 old U.S Rd Malone Fl. 32445
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ 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
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ 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 ex[illegible] 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 [illegible] effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execut[illegible] 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 [illegible]

SIGNATURE: Janice S. Rogers Secretary 7-25-04 850 569-2625
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #