

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000091428

FILED
Jul 02, 2004
Secretary of State

Entity Name: TEQUESTA MANAGEMENT, INC.

Current Principal Place of Business:

200 INTRACOASTAL PLACE UNIT 205
TEQUESTA, FL 33469

New Principal Place of Business:

Current Mailing Address:

200 INTRACOASTAL PLACE UNIT 205
TEQUESTA, FL 33469

New Mailing Address:

FEI Number: 54-2122503

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAMKIN, RALPH
200 INTRACOASTAL PLACE UNIT 205
TEQUESTA, FL 33469

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LAMKIN, RALPH
Address: 200 INTRACOASTAL PLACE UNIT 205
City-St-Zip: TEQUESTA, FL 33469

Title: D () Delete
Name: LAMKIN, DONNA
Address: 200 INTRACOASTAL PLACE UNIT 205
City-St-Zip: TEQUESTA, FL 33469

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: RALPH LAMKIN

MR.

07/02/2004

Electronic Signature of Signing Officer or Director

_____ Date