2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000091663

ORLANDO, FL 32836

City-St-Zip:

FILED Jan 10, 2004 Secretary of State

Entity Name: FOUR FINGERS INC. **Current Principal Place of Business: New Principal Place of Business:** 100 WELDON BLVD. SANFORD, FL 32773 **Current Mailing Address: New Mailing Address:** 8625 VISTA POINT COVE ORLANDO, FL 32836 FEI Number: 20-0171113 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BENNETT, GUY P 8625 VISTA POINT COVE ORLANDO, FL 32836 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition BENNETT, GUY P Name: Name: 8625 VISTA POINT COVE Address: Address: City-St-Zip: ORLANDO, FL 32836 City-St-Zip: () Delete Title: VΡ Title: () Change () Addition Name: BENNETT, KRISTEN D Name: 8625 VISTA POINT COVE Address: Address:

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.

City-St-Zip:

SIGNATURE: GUY BENNETT MR. 01/10/2004