

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000111320

FILED
Apr 22, 2004
Secretary of State

Entity Name: LANCASTER BUSINESS SOLUTIONS, INC.

Current Principal Place of Business:

279 98TH AVE. NE
ST. PETERSBURG, FL 33702

New Principal Place of Business:

Current Mailing Address:

279 98TH AVE. NE
ST. PETERSBURG, FL 33702

New Mailing Address:

P. O. BOX 55101
ST. PETERSBURG, FL 337325101

FEI Number: 20-0299865

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANCASTER, MARSHA D
279 98TH AVE. NE
ST. PETERSBURG, FL 33702

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LANCASTER, MARSHA D
Address: 279 98TH AVE. NE
City-St-Zip: ST. PETERSBURG, FL 33702

Title: V () Delete
Name: SMITH, VALERIE A
Address: 27800 NE 164TH ST.
City-St-Zip: EXCELSIOR SPRINGS, MO 64024

Title: ST () Delete
Name: JONES, MARY K
Address: 1109 VONCILE ST
City-St-Zip: LAKE WALES, FL 33853

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: LANCASTER, MARSHA D
Address: 279 98TH AVE. NE
City-St-Zip: ST. PETERSBURG, FL 33702

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: MARSHA D. LANCASTER

P/D

04/22/2004

Electronic Signature of Signing Officer or Director

Date