## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000117435

Entity Name: PINE ISLAND COFFEE, INC.

FILED May 08, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 5141 PINE ISLAND ROAD BOKEELIA, FL 33992 **Current Mailing Address: New Mailing Address:** 5141 PINE ISLAND ROAD BOKEELIA, FL 33992 FEI Number: 20-0317140 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: SCHUTT, DARRIN R ESQ. SPICKELMIER, CATHERINE R 5029 CURLEW DRIVE 1105 CAPE CORAL PARKWAY EAST SAINT JAMES CITY, FL 33956 US SUITE C CAPE CORAL, FL 33904 US 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: CATHERINE R. SPICKELMIER 05/08/2004 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition SPICKELMIER, CATHERINE R Name: Name: 5029 CURLEW DRIVE Address: Address: City-St-Zip: ST. JAMES CITY, FL 33956 City-St-Zip: Title: (X) Change ( ) Addition Title: () Delete SPICKELMIER, CATHERINE R Name: WINSTON, STUART Name: 11879 KING JAMES COURT 5029 CURLEW DRIVE Address: Address: ST. JAMES CITY, FL 33956 City-St-Zip: CAPE CORAL, FL 33991 City-St-Zip: Title: Title: ( ) Change (X) Addition () Delete V PR SPICKELMIER, CATHERINE R Name: Name: 5029 CURLEW DRIVE Address Address: City-St-Zip: City-St-Zip: ST. JAMES CITY, FL 33956 Title: () Delete Title: **TRES** ( ) Change (X) Addition SPICKLEMIER, CATHERINE R Name: Name: Address: Address: 5029 CURLEW DRIVE City-St-Zip: City-St-Zip: ST. JAMES CITY, FL 33956 Title: Title: ( ) Change (X) Addition () Delete SPICKLEMIER, CATHERINE R Name: Name: Address: Address: 5029 CURLEW DRIVE City-St-Zip: City-St-Zip: ST. JAMES CITY, FL 33956

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: CATHERINE R. SPICKELMIER **PRES** 05/08/2004