

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2004 8:00 am
Secretary of State

02-27-2004 90028 028 ***150.00

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01052004 Chg-P CR2E034 (10/03)

DOCUMENT # P03000121317 1. Entity Name 300YARDS.COM INC.																											
Principal Place of Business 4321 SW 20TH LANE GAINESVILLE, FL 32607 US		Mailing Address 4321 SW 20TH LANE GAINESVILLE, FL 32607 US																									
2. Principal Place of Business 2973 NorthField dr Suite, Apt. #, etc.		3. Mailing Address 2973 NorthField Dr Suite, Apt. #, etc.																									
City & State TARPON Springs Zip 34688 Country US		City & State TARPON Springs Zip 34688 Country US																									
4. FEI Number 20-0370310		Applied For <input type="checkbox"/> Not Applicable																									
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent STONE, ERIC B 4321 SW 20TH LANE GAINESVILLE, FL 32607		7. Name and Address of New Registered Agent Name Eric B Stone Street Address (P.O. Box Number is Not Acceptable) 2973 NorthField Dr City TARPON Springs FL Zip Code 34688																									
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 <u><i>Eric Stone</i></u> DATE <u>2/09/04</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																											
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																									
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 40%;">P</td> <td style="width: 30%; text-align: right;"><input checked="" type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>STONE, ERIC B</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>4321 SW 20TH LANE</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>GAINESVILLE, FL 32607</td> <td></td> </tr> </table>		TITLE	P	<input checked="" type="checkbox"/> Delete	NAME	STONE, ERIC B		STREET ADDRESS	4321 SW 20TH LANE		CITY-ST-ZIP	GAINESVILLE, FL 32607		11. ADDITIONS/CHANGES-TO-OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 40%;">P</td> <td style="width: 30%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>Eric B Stone</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>2973 NorthField Dr</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>TARPON Springs, FL 34688</td> <td></td> </tr> </table>		TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	Eric B Stone		STREET ADDRESS	2973 NorthField Dr		CITY-ST-ZIP	TARPON Springs, FL 34688	
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																											
SIGNATURE: <u><i>Eric Stone</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <u>2/09/04</u> Daytime Phone # <u>352-682-9080</u>																									