

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 02, 2004 8:00 am**  
**Secretary of State**

07-02-2004 90001 043 \*\*\*550.00

**DOCUMENT # P03000123211**

1. Entity Name  
**STEVE LITTLE INC.**



Principal Place of Business  
**8821 W RIVERWOOD DR  
CRYSTAL RIVER FL 34428**

Mailing Address  
**8821 W RIVERWOOD DR  
CRYSTAL RIVER FL 34428**

**54059599**



2. Principal Place of Business

3. Mailing Address  
**P.O. BOX 211**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

06292004

Chg-P

CR2E034 (10/03)

City & State

City & State  
**NEW PORT RICHEY, FL**

4. FEI Number

**90-0114059**

Applied For

Not Applicable

Zip

Country

Zip

**34656**

Country

**USA**

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LITTLE, STEVEN M  
8821 W RIVERWOOD DR  
CRYSTAL RIVER, FL 34428**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00  
Due by September 8, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST LITTLE, STEVEN M 8821 W RIVERWOOD DR CRYSTAL RIVER, FL 34428	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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

**STEVEN M. LITTLE**

JUNE 30, 2004