

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000125392

FILED
Mar 29, 2004
Secretary of State

Entity Name: BLUE MOON OF SARASOTA, INC.

Current Principal Place of Business:

205 TREASURE ROAD
VENICE, FL 342935846

New Principal Place of Business:

Current Mailing Address:

205 TREASURE ROAD
VENICE, FL 342935846

New Mailing Address:

FEI Number: 20-0399989

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANGDON, ALLEN E
125 FIRST AVENUE
NOKOMIS, FL 34275 US

Name and Address of New Registered Agent:

MOON, STEPHEN M D/P
205 TREASURE ROAD
VENICE, FL 34293 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: STEPHEN M MOON D/P

03/29/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MOON, STEPHEN M
Address: 205 TREASURE ROAD
City-St-Zip: VENICE, FL 342935846

Title: ST () Delete
Name: MOON, HEATHER R
Address: 205 TREASURE ROAD
City-St-Zip: VENICE, FL 342935846

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: HEATHER R MOON

ST

03/29/2004

Electronic Signature of Signing Officer or Director

Date