

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000137037

FILED
Jan 20, 2004
Secretary of State

Entity Name: BOCA CIEGA CORPORATION

Current Principal Place of Business:

536 LILLIAN DRIVE
MADEIRA BEACH, FL 33708 US

New Principal Place of Business:

Current Mailing Address:

536 LILLIAN DRIVE
MADEIRA BEACH, FL 33708 US

New Mailing Address:

FEI Number: 20-0419298 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VARANO, GAY
536 LILLIAN DRIVE
MADEIRA BEACH, FL 33708 US

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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Change (X) Addition
Name: HOHL, DAVID J
Address: 536 LILLIAN DRIVE
City-St-Zip: MADEIRA BEACH, FL 33708

Title: P,D () Change (X) Addition
Name: VARANO, GAY
Address: 536 LILLIAN DRIVE
City-St-Zip: MADEIRA BEACH, FL 33708 US

Title: VP,D () Change (X) Addition
Name: VEITSCHEGGER, RODNEY JR.
Address: 1635 SCOTTSVILLE ROAD
City-St-Zip: BOWLING GREEN, KY 42104

Title: S/TR () Change (X) Addition
Name: VARANO, GAY
Address: 536 LILLIAN DRIVE
City-St-Zip: MADEIRA BEACH, FL 33708

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: GAY VARANO

P,D

01/20/2004

Electronic Signature of Signing Officer or Director

_____ Date