2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 11, 2004 8:00 am
Secretary of State
07-09-2004 90008 037 ***150.00

DOCUMENT # P03000145449

1. Entity Name
DAKS PROPERTIES, INC.

66431740

Principal Place of Business	Mailing Address
2871 GREY OAKS BLVD TARPON SPRINGS, FL 34688	2871 GREY OAKS BLVD TARPON SPRINGS, FL 34688

07052004 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 11-3721857 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ROSS, KRISTINE C
2871 GREY OAKS BLVD
TARPON SPRINGS, FL 34688

7. Name and Address of New Registered Agent

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 ______

FILE NOW!!! FEE IS $150.00
Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	~~DP~~	☐ Delete	PRESIDENT	☑ Change ☐ Addition
NAME	ROSS, KRISTINE C			
STREET ADDRESS	2871 GREY OAKS BLVD			
CITY ST ZIP	TARPON SPRINGS, FL 34688			
TITLE	~~DSTV~~	☐ Delete	VICE PRESIDENT	☑ Change ☐ Addition
NAME	~~ROSS, DAVIDINE C~~		ROSS, DAVID C.	
STREET ADDRESS	2871 GREY OAKS BLVD			
CITY ST ZIP	TARPON SPRINGS, FL 34688			
TITLE		☐ Delete		☐ Change ☐ Addition
NAME				
STREET ADDRESS				
CITY ST ZIP				
TITLE		☐ Delete		☐ Change ☐ Addition
NAME				
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CITY ST ZIP				
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NAME				
STREET ADDRESS				
CITY ST ZIP				
TITLE		☐ Delete		☐ Change ☐ Addition
NAME				
STREET ADDRESS				
CITY ST ZIP				

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: Kristine C. Ross Kristine C. Ross
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR