## 2004 FOR PROFIT CORPORATION

## Apr 19, 2004 8:00 am Secretary of State ANNUAL REPORT 04-19-2004 90354 043 \*\*\*150.00 DOCUMENT # P03000147882 CHARLES W. BOOZER, JR., INC. Principal Place of Business Mailing Address 2104 EASTBROOK BOULEVARD P.O. BOX 4341 24048308 WINTER PARK, FL 32793 WINTER PARK, FL 32792 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc Suite, Apt. #, etc. 03252004 CR2E034 (10/03) City & State City & State 4. FEI Number Applied For Not Applicable 20-0453994 Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required -6. Name and Address of Current Registered Agent. Name and Address of New Registered Agent BOOZER, CHARLES W JR. Street Address (P.O. Box Number is Not Acceptable) 2104 EASTBROOK BOULEVARD WINTER PARK, FL 32793 Zip Code City FL 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 rainstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Delete TITLE TITLE ☐ Change Addition BOOZER, CHARLES W JR. NAME NAME 2104 EASTBROOK BOULEVARD STREET ADDRESS STREET ADDRESS WINTER PARK, FL 32793 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 🗆 Delète Change Addition HILE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF ☐ Defete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME\_ NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

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

FILED

like empawered.

ING OFFICER OR DIRECTOR

changed, or on an attachment

AHACHMENT 2414308

#F03000147882

	the second section of the sect	The second secon
	$-\eta$	
l ou	hel you plea	se advise me il
11	1.	· La ·
There	is any	state agency in
- She	Orlando are	a that could
help	me with	questions pertaine
- 15 5	- Porporal &	La sun Shells
	cogramos	o miles freeze
wilk	Jakes + u	nemplonement
tari	and the	
		Spanks
		Charles W. Broarth
-		201-251 0076
		14 256/115
<del></del>	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	
	<del></del>	
	······································	
··		