## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## Secretary of State **DOCUMENT # P04000000821** 07-14-2004 90001 022 \*\*\*150.00 F.C.E., INC. Principal Place of Business Mailing Address 109 THAMES PL SW 109 THAMES PL SW 44048253 FT. WALTON BEACH, FL 32548 FT. WALTON BEACH, FL 32548 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07092004 Chg-P CR2E034 (10/03) City & State City & State Applied For 4. FEI Number 20-0651684 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PERRI, DANIEL C Street Address (P.O. Box Number is Not Acceptable) 4 ELEVENTH AVE SUITE 1 SHALIMAR, FL 32579 City 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 SIGNATURE. Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when rematating) \$5.00 May Be Added to Fees 9. Election Campaign Financing FILE NOWILL FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Trust Fund Contribution. Due by September 8, 2004 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE Delete TITLE ☐ Change ☐ Addition WATSON, CASS NAME NAME STREET ADDRESS 109 THAMES PL STREET ADDRESS CITY-ST-ZIP FT. WALTON BEACH, FL 32548 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME WATSON, BRENDA NAME STREET ADDRESS STREET ADDRESS 109 THAMES PL FT. WALTON BEACH, FL 32548 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition ΠΠE WATSON, ANTHONY NAME NAME STREET ADDRESS 38.CARSON.DR STREET ADDRESS CITY-ST-ZIP FT. WALTON BEACH, FL 32548 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TILE TITLE Change ☐ Addition ☐ Delete NAME STREET ANDRESS STREET ADDRESS CITY-ST-73P CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 erpowered 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. 7-12-04 SIGNATURE OFFICER OR DIRECTOR

FILED

Jul 14, 2004 8:00 am

afforhment # POYOOOOO821 LAW OFFICE OF DANIEL C. PERRI

> Attorneys at Law 4 Eleventh Avenue, Suite One Shalimar, Florida 32579 charlene@perrilawoffice.com

44048253

Daniel C. Perri Lisa Y. Pitell Telephone (850) 651-3011 Facsimile (850) 651-3306

Division of Corporations P.O. Box 1500 Tallahassee, Florida 32302-1500 CERTIFIED MAIL RETURN RECEIPT #7003 3110 0005 3786 7490

Re: F.C.E., Inc.

Dear Sir or Madam:

Please find enclosed herewith the 2004 For Profit Corporation Annual Report for F.C.E., Inc., together with a check in the amount of \$150.00 to cover the filing fee. If you have any questions or require further information, please do not hesitate to contact this office.

fy truly yours,

Charlene Chang, Assistant to

Daniel C. Perri

/cec

Enc.

cc:

Cass Watson