

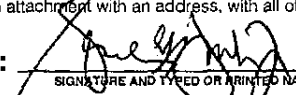


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 01, 2004 08:00 AM
Secretary of State

DOCUMENT # P18369			
1. Entity Name SHAWNEE AT TREASURE ISLAND, INC.			
Principal Place of Business PO BOX 93, FT DEPUY 2 SHAWNEE-ON-DELAWARE, PA 18356-0093 US		Mailing Address P.O. BOX 93 SHAWNEE ON DELAWARE, PA 18356 US	
DO NOT WRITE IN THIS SPACE			
		01062004 No Chg-P CR2E034 (10/03)	
		4. FEI Number 23-2357460	Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent MCNEW, JO ANN 12300 GULF BLVD. TREASURE ISLAND, FL 33706		DO NOT WRITE IN THIS SPACE	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000100847 04/01/04-80025-002 300.00
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST DURKIN, GERALD F JR FT DEPUY 2 RIVER RD, PO BOX 93 SHAWNEE ON DELAWARE, PA		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD SHELBELSKY, ROBERT A. RD 6, BOX 6278 E STROUDSBURG, PA		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S SCOTT D AHLUM FT DEPUY, RIVER ROAD SHAWNEE ON DELAWARE, PA		
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
TITLE 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)(f), 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:  GERALD F. DURKIN JR		Date 3-24-04	Daytime Phone # 570 424 8099