## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## **Secretary of State** DOCUMENT # P93000030119 1. Entity Name 06-04-2004 90003 001 \*\*\*150.00 LYNN TITUS, INC. Principal Place of Business Mailing Address 6540 TRAIL BLVD 6540 TRAIL BLVD 14796056 NAPLES, FL 34108 US NAPLES, FL 34108 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03262003 CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 65-0402720 Not Applicable 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 TITUS, A. LYNN Street Address (P.O. Box Number is Not Acceptable) 4710 WEST BLVD. NAPLES, FL 34103 City Zip Code 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 reinstaling) FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Due by September 8, 2004 Added to Fees 10. OFFICERS AND DIRECTORS 11, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 KIOPSHAD, LYNN T. TITLE ☐ Delete TITLE Addition KLOPSTAD, LUINN T NAME NAME 6540 TRAIL BIND 6540 TRAIL BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NAPLES, FL 34108 Naples FI 34108 CITY-ST-7IP TITLE ☐ Defete TITLE ☐ Change Addition JEFF, KLOPSTAD NAME STREET ADDRESS 6540 TRAIL BLVD STREET ADDRESS CITY-ST-7IP NAPLES, FL 34108 CITY-ST-7IP TITLE ☐ De ete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP THE Delete TITE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete DILE Change ■ Addition 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 12. Thereby 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 it made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to Secule 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. 6-1-04 SIGNATURE:

**FILED** 

Jun 04, 2004 8:00 am

Heren 54056750 T:4. #193000030119

State Certified General Contractors **CGC 042082** 

**Division of Corporations** P.O. Box 1500 Tallahassee, Fl 32302-1500

June 1, 2004

I was told by Lee, from the internet communication, to send this letter. I just realized today, that my check for the annual corporate filing fee, #1321 sent April 6, 2004, was not cashed! I contacted a Ms.Lee, through email, to see if you got my application and check, and found out that you did not.

I sincerely hope that you waive the late fee, because it must have got lost in the mail. I tried to email the report, but after several attempts, it did not work. I am ALWAYS on time with this payment. Please accept this explanation and my check for **\$**150.00.

I will send it certified and if you ever get my application and check, please send it back.

Sincerely

Lynn Titus-Klopstad

Lynn Titus Inc.