

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2004 8:00 am
Secretary of State

04-12-2004 90637 040 ***150.00

DOCUMENT # P93000077500	
1. Entity Name MICHIANA COMPANY, INC.	

Principal Place of Business 2881 LACONCHA DR. CLEARWATER, FL 33762	Mailing Address 2881 LACONCHA DR. CLEARWATER, FL 33762
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14001795



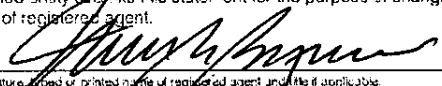
2. Principal Place of Business 9525 BLIND PASS RD	3. Mailing Address 9525 BLIND PASS RD
Suite, Apt. #, etc. # 206	Suite, Apt. #, etc. # 206
City & State ST. PETE BCH, FL	City & State ST. PETE BCH, FL
Zip 33706	Zip 33706
Country USA	Country USA

02102004 Chg-P CR2E034 (10/03)

4. FEI Number 59-3231368	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent BYRNE, JOHN B 2881 LACONCHA DR. CLEARWATER, FL 33762	
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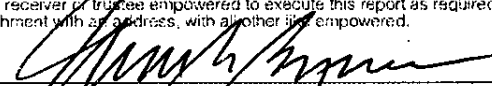
7. Name and Address of New Registered Agent Name JOHN B. BYRNE Street Address (P.O. Box Number is Not Acceptable) 9525 BLIND PASS RD #206 City ST. PETE BCH, FL Zip Code 33706	
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8. The above named entity submits this statement for the purpose of changing 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:  DATE: 05 APR. 2004	
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FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD BYRNE, JOHN B 2881 LACONCHA DR. CLEARWATER, FL 33762 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD BYRNE, MARTHA H 2881 LACONCHA DR. CLEARWATER, FL 33762 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BYRNE, JULIA B 2881 LACONCHA DR. CLEARWATER, FL 33762 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P-T-D JOHN B BYRNE 9525 BLIND PASS RD ST. PETE BCH, FL, 33706 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V-S-D FRIA, JANA BYRNE 21 BEACON HILL LN MILFORD, CT, 06460 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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 information empowered.	
SIGNATURE: 	Date: 05 April 2004

727-043-7788