

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 05, 2004 8:00 am**  
**Secretary of State**

04-05-2004 90071 016 \*\*\*158.75

**DOCUMENT # P93000085793**

1. Entity Name

CENTRAL SYSTEMS S.E., INC.



Principal Place of Business

2620 IROQUOIS  
SANFORD FL 32773

Mailing Address

2620 IROQUOIS  
SANFORD FL 32773

2. Principal Place of Business

1365 B. PALOMINO Tr.

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 1472

Suite, Apt. #, etc.

City & State

GENEVA, FL.

City & State

GENEVA, FL

Zip

32732

Country

USA

Zip

32732

Country

USA

4. FEI Number

59-3220577

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

CLARK, DONNA  
2620 IROQUOIS  
SANFORD FL 32773

7. Name and Address of New Registered Agent

Name CLARK, DONNA

Street Address (P.O. Box Number is Not Acceptable)

1365 PALOMINO Trail

City GENEVA

FL

Zip Code

32732

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

*Donna Clark*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3-31-04

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution.

☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete  
NAME CLARK, ROBERT W  
STREET ADDRESS 2620 IROQUOIS AVE.  
CITY-ST-ZIP SANFORD FL 32773

TITLE D ☐ Delete  
NAME CLARK, DONNA  
STREET ADDRESS 2620 IROQUOIS AVE.  
CITY-ST-ZIP SANFORD FL 32773

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE V ☒ Change ☐ Addition  
NAME CLARK, ROBERT W  
STREET ADDRESS 1365 PALOMINO Trail  
CITY-ST-ZIP GENEVA, FL 32732

TITLE P/T ☒ Change ☐ Addition  
NAME CLARK, DONNA  
STREET ADDRESS 1365 PALOMINO TRAIL  
CITY-ST-ZIP GENEVA, FL 32732

TITLE S ☐ Change ☒ Addition  
NAME TRAVIS L. CLARK  
STREET ADDRESS 1345 PALOMINO TRAIL  
CITY-ST-ZIP GENEVA, FL 32732

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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)(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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*DONNA CLARK Donna Clark-P.*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-31-04 407-349-3565