

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000012957

FILED  
May 01, 2004  
Secretary of State

Entity Name: LUMINARY VENTURES, INC.

## Current Principal Place of Business:

40347 U.S. 19 NORTH  
SUITE 136  
TARPON SPRINGS, FL 34689 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 1076  
TARPON SPRINGS, FL 34688 US

## New Mailing Address:

FEI Number: 59-3232715      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HEWETSON, GARY  
1501 BELCHERE RD. SOUTH  
#2-B  
LARGO, FL 33771 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CMD ( ) Delete  
Name: DONIZETTI, LARRY  
Address: 950 CARSTAIRS CT.  
City-St-Zip: TARPON SPRINGS, FL

Title: PD ( ) Delete  
Name: EUBANKS, BOB  
Address: 3617 ROBLAR AVE.  
City-St-Zip: SANTA YNEZ, CA

Title: STVD ( ) Delete  
Name: DONIZETTI, MARIA  
Address: 950 CARSTAIRS CT.  
City-St-Zip: TARPON SPRINGS, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LARRY DONIZETTI

CMD

05/01/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date