


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 26, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P94000023554</b>		
1. Entity Name C&L DIVERSIFIED INDUSTRIES, INC.		
Principal Place of Business 3622 W INTERNATIONAL SPEEDWAY BLVD DAYTONA BEACH, FL 32124		Mailing Address 3622 W INTERNATIONAL SPEEDWAY BLVD DAYTONA BEACH, FL 32124
<b>DO NOT WRITE IN THIS SPACE</b>		
		 04142004 No Chg-P CR2E034 (10/03)
4. FEI Number 65-0484366		Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required
6. Name and Address of Current Registered Agent  MANN, CLARENCE 3622 W INTERNATIONAL SPEEDWAY BLVD DAYTONA BEACH, FL 32124		<b>DO NOT WRITE IN THIS SPACE</b>
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when renewing)</small> DATE _____		
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
10. OFFICERS AND DIRECTORS		U000000130276 04/26/04-90119-008 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MANN, CLARENCE 3622 W INTERNATIONAL SPEEDWAY BLVD DAYTONA BEACH, FL 32124	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SEVERSON, LUCILLE 3622 W INTERNATIONAL SPEEDWAY BLVD DAYTONA BEACH, FL 32124	
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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)(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: <i>Clarence B. Mann</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		4/22/04 Date Daytime Phone #