

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000040872

FILED
Apr 26, 2004
Secretary of State

Entity Name: AEGEAN CAPITAL APPRECIATION, INC.

Current Principal Place of Business:

1560 WALDORF DR NE
PALM BAY, FL 32905

New Principal Place of Business:

394 LANTERNBACK ISLAND DR
SATELLITE BCH, FL 32937

Current Mailing Address:

1560 WALDORF DR NE
PALM BAY, FL 32905

New Mailing Address:

394 LANTERNBACK ISLAND DR
SATELLITE BCH, FL 32937

FEI Number: 59-3243838

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MYER, TAMI
1496 HYACINTH AVE NE
PALM BAY, FL 32907 US

Name and Address of New Registered Agent:

FREDRICKS, LOIS A
1501 ROBERT J CONLAN BLVD
SUITE 170
PALM BAY, FL 32905 US

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: LOIS A FREDRICKS

04/26/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FAKATSELIS, JOHN C
Address: 1560 WALDORF DR NE
City-St-Zip: PALM BAY, FL 32905

Title: D () Delete
Name: MYER, CHRISTOPHER P
Address: 1496 HYACINTH AVE NE
City-St-Zip: PALM BAY, FL 32907

Title: D () Delete
Name: TRICAS, TIMOTHY C
Address: 3030 LOWREY STREET, APT 111
City-St-Zip: HONOLULU, HI 96822

Title: D () Delete
Name: FAKATSELIS, GEORGE
Address: 9340 SKILLMAN ST #1102
City-St-Zip: DALLAS, TX 75243

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:

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: JOHN FAKATSELIS

D

04/26/2004

Electronic Signature of Signing Officer or Director

Date