

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000062414

FILED
Jan 07, 2004
Secretary of State

Entity Name: BTF, INC.

Current Principal Place of Business:

6373 S SUNCOAST BLVD
HOMOSASSA SPRINGS, FL 34446 US

New Principal Place of Business:

6373 S SUNCOAST BLVD
HOMOSASSA, FL 34446 US

Current Mailing Address:

6373 S SUNCOAST BLVD
HOMOSASSA SPRINGS, FL 34446 US

New Mailing Address:

6373 S SUNCOAST BLVD
HOMOSASSA, FL 34446 US

FEI Number: 59-3263929

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUSHMAN, THOMAS R
6373 S SUNCOAST BLVD
HOMOSASSA SPRINGS, FL 34446 US

Name and Address of New Registered Agent:

CUSHMAN, THOMAS R
6373 S SUNCOAST BLVD
HOMOSASSA, FL 34446 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:

01/07/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVST () Delete
Name: CUSHMAN, THOMAS R
Address: 6373 S SUNCOAST BLVD
City-St-Zip: HOMOSASSA SPRINGS, FL

Title: D () Delete
Name: CUSHMAN, THOMAS R
Address: 6373 S SUNCOAST BLVD
City-St-Zip: HOMOSASSA SPRINGS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change () Addition
Name: CUSHMAN, THOMAS R
Address: 6373 S SUNCOAST BLVD
City-St-Zip: HOMOSASSA, FL 34446

Title: D (X) Change () Addition
Name: CUSHMAN, THOMAS R
Address: 6373 S SUNCOAST BLVD
City-St-Zip: HOMOSASSA, FL 34446

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: THOMAS R. CUSHMAN

P

01/07/2004

Electronic Signature of Signing Officer or Director

Date