2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 08, 2004
Secretary of State

DOCUMENT# P94000067205

Entity Name: THE BULLPEN CAFE, INC.

Current Principal Place of Business:

6771 HIGHWAY 98 NORTH
LAKELAND, FL 33809

New Principal Place of Business:

Current Mailing Address:

6771 HIGHWAY 98 NORTH
LAKELAND, FL 33809

New Mailing Address:

FEI Number: 59-3267189 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ARTMAN, STEPHEN H
908 S. FLORIDA AVE.
STE. 201
LAKELAND, FL 33803 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: LOUGHLIN, JAMES J
Address: 10147 BOSEMAN DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34656

Title: VPTD ( ) Delete
Name: LOUGHLIN, SHARON
Address: 5115 N SOCRUN LOOP RD APT 370
City-St-Zip: LAKELAND, FL 33809

Title: PD ( ) Delete
Name: LOUGHLIN, MICHEAL
Address: 5115 N SOCRUN LOOP RD APT 370
City-St-Zip: LAKELAND, FL 33809

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: MICHEAL LOUGHLIN P 09/08/2004

Electronic Signature of Signing Officer or Director — Date