

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 29, 2004 08:00 AM** ---  
**Secretary of State**

<b>DOCUMENT # P94000089352</b> 1. Entity Name CADIA, INC.	
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Principal Place of Business 22200 LAKE SENECA RD EUSTIS, FL 32736	Mailing Address 22200 LAKE SENECA RD EUSTIS, FL 32736
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<b>DO NOT WRITE IN THIS SPACE</b>
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01062004 No Chg-P CR2E034 (10/03)

4. FE# Number 59-3281382	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  BLANCHARD, CLAYTON H 22200 LAKE SENECA RD EUSTIS, FL 32736
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<b>DO NOT WRITE IN THIS SPACE</b>
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when rechartering) 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	
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<b>10. OFFICERS AND DIRECTORS</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BLANCHARD, CLAYTON H JR. 22200 LAKE SENECA RD EUSTIS, FL 32736
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST BLANCHARD, AMY BETH 22200 LAKE SENECA RD EUSTIS, FL 32736
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03/29/04-80008-007 150.00

**DO NOT WRITE  
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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:** Amy Blanchard Amy Blanchard 352/357-2788  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

3/26/04