## **2004 FOR PROFIT CORPORATION**

## Feb 02, 2004 8:00 am **Secretary of State ANNUAL REPORT** DOCUMENT # P95000000251 02-02-2004 90011 023 \*\*\*150.00 1. Entity Napré PHILLIPPI CREEK FISHERY, INC. Principal Place of Business Mailing Address 5353 SOUTH TAMIAMI TRAIL 5353 SOUTH TAMIAMI TRAIL SARASOTA, FL 34231 SARASOTA, FL 34231 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01202004 CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 65-0561558 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LAPATO, JOHN ("JACK") E Street Address (P.O. Box Number is Not Acceptable) 5353 SOUTH TAMIAMI TRAIL SARASOTA, FL 34231 City Zip Code 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. 1 am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE Addition Change LAPATO, JOHN ("JACK") E NAME STREET ADDRESS 3865 TROPICARE BLVD STREET ADDRESS CITY-ST-ZIP NORTH PORT, FL 34286 CITY-ST-ZIP Delete TITLE TITLE ☐ Change ☐ Addition LAPATO, JEAN A NAME 3865 TROPICARE BLVD STREET ADDRESS STREET ADDRESS CITY-S1-ZIP\_ NORTH PORT, FL 34286 CITY-ST-ZIP ☐ Delete TITLE THLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TILLE TITLE ' Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

FILED

☐ Change

Addition

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 outrustee 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 attachmen all other like empowered

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:



Attachment 24005278

## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

January 20, 2004

PHILLIPPI CREEK FISHERY, INC. 5353 SOUTH TAMIAMI TRAIL SARASOTA, FL 34231

SUBJECT: PHILLIPPI CREEK FISHERY, INC. Ref. Number: P95000000251

We have received your document for PHILLIPPI CREEK FISHERY, INC. and check(s) totaling \$150.00. However, your check(s) and document are being returned for the following:

Only applications approved by the Department of State are acceptable. Please complete the enclosed approved application and return it to our office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Justin M Shivers Document Specialist

Letter Number: 304A00003494