

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000004147

Entity Name: ISLAND HUTWORKS, INC.

FILED  
Feb 23, 2004  
Secretary of State

## Current Principal Place of Business:

100 S. SPOOKY LN  
#4D  
SANTA ROSA BEACH, FL 32459

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 1689  
SANTA ROSA, FL 32459

## New Mailing Address:

FEI Number: 59-3298193

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

POOL, TROY D  
100 S. SPOOKY LN  
#4D  
SANTA ROSA BEACH, FL 32459 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VP ( ) Delete  
Name: LENARD, THOMAS A  
Address: 89351 OVERSEAS HWY  
City-St-Zip: PLANTATION KEY, FL 33070

Title: TS ( ) Delete  
Name: DENNISON-POOL, JAN E  
Address: 100 S. SPOOKY LN #4D  
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: P ( ) Delete  
Name: POOL, TROY DEAN  
Address: 100 S. SPOOKY LANE # 40  
City-St-Zip: SANTA ROSA BEACH, FL 32459

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: DENNISON-POOL, JAN E  
Address: 100 S. SPOOKY LN #4D  
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: PTS (X) Change ( ) Addition  
Name: POOL, TROY DEAN  
Address: 100 S. SPOOKY LANE # 40  
City-St-Zip: SANTA ROSA BEACH, FL 32459

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: TROY DEAN POOL

P

02/23/2004

Electronic Signature of Signing Officer or Director

Date