

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000014129

Entity Name: FLYCASTER & CO., INC.

FILED
Jan 05, 2004
Secretary of State

Current Principal Place of Business:

P.O. BOX 357606
GAINESVILLE, FL 326357606 US

New Principal Place of Business:

14722 NW 140TH ST
ALACHUA, FL 32615 US

Current Mailing Address:

P.O. BOX 357606
GAINESVILLE, FL 326357606 US

New Mailing Address:

FEI Number: 65-0614605 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPENCE, JOHN
7208 SW 22 PLACE
GAINESVILLE, FL 32606 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: D () Delete
Name: SPENCE, JOHN B
Address: 7208 SW 22 PLACE
City-St-Zip: GAINESVILLE, FL 32606

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DO () Change (X) Addition
Name: HOLCOMB, SHEILA A
Address: PO BOX 357606
City-St-Zip: GAINESVILLE, FL 32635

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: SHEILA A HOLCOMB

DO

01/05/2004

Electronic Signature of Signing Officer or Director

Date