


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P95000049513 1. Entity Name THE RED GATOR CAFE CO.	
---	---

Principal Place of Business 600 NO STATE STREET BUNNELL, FL 32110	Mailing Address 6 EDITH LANE PALM COAST, FL 32164
---	---

DO NOT WRITE IN THIS SPACE

05052004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3322818	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent CURLEY, PATRICIA 6 EDITH LANE PALM COAST, FL 32164
--

**DO NOT WRITE
IN THIS SPACE**

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 reinstating) DATE _____

FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	---

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CURLEY, THOMAS 6 EDITH LANE PALM COAST, FL 32164
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CURLEY, PATRICIA 6 EDITH LANE PALM COAST, FL 32164
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

900037342269
05/26/04--01049--022 **150.00

**DO NOT WRITE
IN THIS SPACE**

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: *Patricia A. Curley* **PATRICIA A. Curley** **5-13-04 386-437-2233**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #