## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

## **FILED** Apr 21, 2004 08:00 AM Secretary of State DOCUMENT # P95000059293 CHARLES R. SULLIVAN, INC. Principal Place of Business Mailing Address 4902 S. CALHOUN ROAD 4902 S. CALHOUN ROAD PLANT CITY, FL 33567 PLANT CITY, FL 33567 04192004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3332528 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DICKENS, MARK S DO NOT WRITE 9340 N. 56TH ST STE 200A IN THIS SPACE TAMPA, FL 33617 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 Signature, typed or printed name of registered agent and title if applicable (NGTE: Registered Agent signature required when re instation) TACE 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 U00000122136 10. OFFICERS AND DIRECTORS TITLE SULLIVAN, CHARLES R NAME STREET ADDRESS 4902 S. CALHOUN RD. CITY-ST-ZIP PLANT CITY, FL 33567 7171 គ NAME STREET ADDRESS CITY-ST-78P TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TATLE NAME STREET ADDRESS CITY-ST-ZIP TRILE NAME

12. If hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f). 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 Block10 or Block11 if changed, or on an attachment withan address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP