## 2004 FOR PROFIT CORPORATION

## Apr 07, 2004 08:00 AM Secretary of State **ANNUAL REPORT** DOCUMENT # P95000083497 1. Entity Name SIG BAR ASSOCIATION, INC. Principal Place of Business Mailing Address 6585 126TH AVE NORTH 6585 126TH AVE N LARGO, FL 33773 LARGO, FL 33773 03312004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3340765 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RYDER, RONALD DO NOT WRITE 6585 126TH AVENUE NORTH LARGO, FL 33773 IN THIS SPACE 3. 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 (NOTE Registered Agent signature required when reinstating) U00000105673 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 \$5.00 May 8e 04/07/04-80035-005 150.00 Trust Fund Contribution Added to Fees 10. OFFICERS AND DIRECTORS PT TITLE NAME RYDER, RONALD 6585 126TH AVE N STREET ADORESS CITY-ST-ZIP LARGO, FL 313LE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE C11Y - ST - Z1P TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling 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 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all

SIGNATURE:

CITY-ST-28P TITLE NAME STREET ADDRESS CITY-ST-DP

PRES

727-535-6638

**FILED**