2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 30, 2004 08:00 AM Secretary of State

DOCUMENT # 1. Entity Name HELENE MCROBE	i				
Principal Place of Business		Mailing Address			
51 MUTINY PL. KEY LARGO, FL 33037	US	P.O. BOX 1030 KEY LARGO, FL 33037	US	}	

DO NOT WRITE IN THIS SPACE



04292004

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-0623920 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MCROBERTS, HELENE 51 MUTINY PLACE KEY LARGO, FL 33037

SIGNATURE:

DO NOT WRITE IN THIS SPACE

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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_	Consider a bound or content grown of sever found grant and till	facelyands (MOTE Pariston	d Agent complute	required when remplahro)	DATE			
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE								
	E NOW!!! FEE IS \$150.00 by 1, 2004 Fee will be \$550.00	Election Campaign Final Trust Fund Contribution.		\$5.00 May Be Added to Fees				
10.	OFFICERS AND DIREC	CTORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MCROBERTS, HELENE 51 MUTINY PLACE KEY LARGO, FL							
TITLE NAME STREET ADDRESS CITY-ST-ZIP					G00000144961 Je/30/04-80147-022 158.75			
TITLE NAME			1					
STREET ADDRESS				DO	NOT WRITE			
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP					THIS SPACE			
TITLE NAME STREET ADDRESS CITY-SI-ZIP								
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
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.								