


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 02, 2004 8:00 am
Secretary of State

06-02-2004 90004 040 ***150.00

DOCUMENT # P96000015040 1. Entity Name BLUE MOUNTAIN GROCERY INC.	
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Principal Place of Business 2320 W HWY 30-A W SANTA ROSA BEACH, FL 32459 US	Mailing Address 2320 W HWY 30-A W SANTA ROSA BEACH, FL 32459 US
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DO NOT WRITE IN THIS SPACE



05072004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3360526	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent
**BRADLEY, SARA
2320 HWY C-30 W
SANTA ROSA BEACH, FL 32459**

**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: SARA R. BRADLEY SARA R. BRADLEY 5-25-04
Signature, typed or printed name of registered agent and title if applicable. (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. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BRADLEY, SARA 2320 HWY C-30 AW SANTA ROSA BCH, FL 32459
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST BRADLEY, S. PEYTON 2320 W. HWY 30-A SANTA ROSA BEACH, FL 32459 <i>REMOVED AS OFFICER</i>
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	

**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: SARA R. BRADLEY SARA R. BRADLEY 5/25/04 267-2016
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment

To Whom It May Concern:

P9600015048
44046111

I have received a form to renew
my copmation. I just happened to remen-
ber - I asked my accountant to help.

Mr. He provided form however I

Want to remove 2nd officer

S. Peyton Bradley. Please call

me with any questions + please

Thank you for

850 267-2014

5/25/04

Respectfully,

Para Bradley