2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Mar 12, 2004 8:00 am **Secretary of State** DOCUMENT # P96000016410 1. Entity Name 03-12-2004 90012 027 ***158.75 GLOBAL VILLAGE PROPERTIES, INC. Principal Place of Business Mailing Address 406 US HWY ONE 11420 STRANO DR. 54017574 LAKE PARK FL 33403 ROCKVILLE MD 20852 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (11/03) Applied For City & State City & State 4. FEI Number 65-0646021 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name COOK, ROBERT B ESQUIRE Street Address (P.O. Box Number is Not Acceptable) 11911 U.S. HIGHWAY ONE SUITE 308 NORTH PALM BEACH FL 33408 Zip Code 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. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. JENNIFER ANNE WETSS Change Addition TITLE ☐ Delete TITLE NAME KIMBERLY, JENNIFER W NAME 1103 WHIBISCUS BLUD SUITE 408 23040 BRIGHTON PL. STREET ADDRESS STREET ADDRESS W. MELBOURNE, FL 3290/ CITY-ST-7IP LAND O LAKES FL 34639 CITY-ST-ZIP **PRES** ☐ Delete TITLE ☐ Change ☐ Addition NAME WEISSLINDA S STREET ADDRESS 11420 STRANO DR APT 8 STREET ADDRESS CITY-ST-ZIP **ROCKVILLE MD 20852** CITY-ST-ZIP TITLE Delete TITLE KIMBERLY DAWN WEISS DELANEY NAME NAME STREET ADDRESS STREET ADDRESS* 8422 SEROYALST HOBE SOUND, A 33455 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete D (VPRES) TITLE TITL F Addition GREGORY SCOTT WEISS NAME NAME 8325 EZKO OR STREET ADDRESS STREET ADDRESS ELLICOTT CITY, MO 21043 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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 chapted, or on an attachment with an address, with all other like-empowered.

SIGNATURE: _

240-401-2723

FILED