2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000041152

1. Entity Name

Principal Place of Business

MELBOURNE BEACH, FL 32951

LONGPOINT BAIT & TACKLE, INC.

Mailing Address

100 LONGPOINT ROAD 100 LONGPOINT ROAD

MELBOURNE BEACH, FL 32951

FILED Apr 23, 2004 08:00 AM Secretary of State



 \Box

DO NOT WRITE IN THIS SPACE

04202004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3377543

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ANDERSON, J. PATRICK 930 S. HARBOR CITY BLVD. SUITE 505 MELBOURNE, FL 32901

DO NOT WRITE IN THIS SPACE

MEEDOONAL, 1 E 02001						
8. The above named enlity 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) DATE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		Election Campaign Finan- Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS				
TITLE NAME STREET AODRESS CITY-ST-ZIP	D GEBELEIN, DALE 7785 A1A S MELBOURN BCH, FL 32951				000000127310 04/23/04-80066-025 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GEBELEIN, MICHELLE E 7785 A1A S MELBOURN BCH, FL 32951					
TITLE NAME STREET ADDRESS CITY-SI-ZIP	T GEBELEIN, TROY M 146 AMBER PL MELBOURNE BEACH, FL 32951			DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT GEBELEIN, DALE F JR 373 HIAWATHA WAY MELBOURNE BEACH, FL 32951					
NAME STREET ADDRESS CITY-ST-ZIP						

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 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:

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Dale & Sebelin

4-21-04

321-984-4131

Date

Daytime Phone #