

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 13, 2004 08:00 AM
Secretary of State

DOCUMENT # P96000058006

1. Entity Name
COPPER HEAD METAL WORKS, INC.



Principal Place of Business
**3099 LEON RD
SUITE 3
JACKSONVILLE, FL 32246**

Mailing Address
**POST OFFICE BOX 16874
JACKSONVILLE, FL 32245**



03052004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3389559	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

**LANDAU, FRANCINE CLAIR ESQ.
1301 RIVERPLACE BLVD., SUITE 740
JACKSONVILLE, FL 32207**

**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

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**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U000000111377
04/13/04-80014-020 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	MORRIS, DOUGLAS J
STREET ADDRESS	1835 HILLTOP BLVD.
CITY-ST-ZIP	JACKSONVILLE, FL 32246

TITLE	D
NAME	MAXEY, DONALD A
STREET ADDRESS	2106 EUCLID STREET
CITY-ST-ZIP	JACKSONVILLE, FL 32210

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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STREET ADDRESS	
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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:

[Signature]

3-8-04

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