## **2004 FOR PROFIT CORPORATION ANNUAL REPORT**

## Aug 10, 2004 8:00 am Secretary of State DOCUMENT # P96000091128 08-10-2004 90003 046 \*\*\*558.75 ADVÁNCED PROPERTY SEARCH, INC. Principal Place of Business Mailing Address 2909 JASMINE ST. 2909 JASMINE ST. TITUSVILLE, FL 32796 TITUSVILLE, FL 32796 US 2. Principal Place of Business 4213 Pondapple 3. Mailing Address 4213 Pordapple Dr. Suite, Apt. #, etc. Suite, Apt. #, etc 06292004 CR2E034 (10/03) City & State City & State 4. FEI Number Applied For Titusville 59-3441022 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired 32796 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent VAN FOSSAN-STOCK, JODI Street Address (P.O. Box Number is Not Acceptable) 2909 JASMINE ST. TITUSVILLE, FL 32796 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 agen ાગામકાશ્ર title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$550.00 \$5.00 May Be Due by September 8, 2004 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE Change ☐ Addition NAME VANFOSSAN-STOCK, JODI Jodi VanFossan Stock Uzia Pondapple Dr. Titusville, FL 32796 NAME 2909 JASMINE ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITUSVILLE, FL 32796 CITY-ST-ZIP TITLE ☐ 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-ZIP CITY-ST-ZIP TITLE ☐ 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-ZIP CITY-ST-7IP TITLE Delete TITLE ☐ Change ☐ Addition 5 - 1 - 22 5 C 18 NAME NAME 30.5.6975 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 changed, or on an attachment with an address, with all other like empowered.

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