


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 30, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P96000098265</b>	
1. Entity Name ELDA, INC.	

Principal Place of Business 2216 64TH STREET COURT EAST BRADENTON, FL 34208	Mailing Address 2216 64TH STREET COURT EAST BRADENTON, FL 34208
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**DO NOT WRITE IN THIS SPACE**



04022004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0717158	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  HARDEE, SAM F 2216 64TH STREET COURT EAST BRADENTON, FL 34208
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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 \_\_\_\_\_ (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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HARDEE, SAM F 2216 64TH STREET COURT EAST BRADENTON, FL 34208
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD LAWSON, DONALD M 1800 2ND ST., SUITE 910 SARASOTA, FL 34236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD STEPHENS, STANLEY E 5515 21ST AVE., W. BRADENTON, FL 34209
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD JOHNSON, CLAYTON 5515 21ST AVE., W. BRADENTON, FL 34209
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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05/03/04-80040-002 150.00

**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** Sam F. Hardee (P) 42704 748 8893  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #