2004 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Apr 16, 2004 08:00 AM
Secretary of State

DOCUMENT # P97000013461

1. Entity Name
OSTRENGA FINANCIAL SERVICES, INC.

Principal Place of Business	Mailing Address
1809 BAYVIEW AVE	P.O. BOX 4701
PANAMA CITY, FL 32405-1518 US	PANAMA CITY, FL 32401-8701 US

DO NOT WRITE IN THIS SPACE

01092004   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
59-3426004	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

OSTRENGA, TIMOTHY
1809 BAYVIEW AVENUE
PANAMA CITY, FL 32405

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

0000000116634
04/16/04-80071-019 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	OSTRENGA, TIMOTHY
STREET ADDRESS	1809 BAYVIEW AVENUE
CITY-ST-ZIP	PANAMA CITY, FL 32405

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: _____ TIMOTHY OSTRENGA   4/15/04   (850) 872-6908
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #