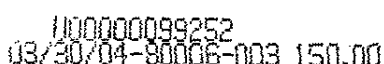


FILED

Mar 30, 2004 08:00 AM
Secretary of State2004 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P97000024491			
1. Entity Name MAGNOLIA HOUSE OF GRAYTON BEACH, INC.			
Principal Place of Business 2 MAGNOLIA ST SANTA ROSA BEACH, FL 32459		Mailing Address 2 MAGNOLIA ST SANTA ROSA BEACH, FL 32459	
DO NOT WRITE IN THIS SPACE			
		03292004 No Chg-P CR2E034 (10/03)	
		4. FEI Number 59-3448436	
		Applied For ☐ Not Applicable	
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent VELDMAN, RICHARD 2 MAGNOLIA ST SANTA ROSA BEACH, FL 32459		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 _____ (NOTE: Registered Agent signature required when re-election) Signature, typed or printed name of registered agent and title if applicable. 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		 1100000099252 03/30/04-80006-003 150.00 DO NOT WRITE IN THIS SPACE	
TITLE D NAME VELDMAN, RICHARD STREET ADDRESS 1401 BAYTOWNE E. CITY-ST-ZIP DESTIN, FL 32541			
TITLE D NAME VELDMAN, NANCY STREET ADDRESS 1401 BAYTOWNE E. CITY-ST-ZIP DESTIN, FL 32541			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS 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.			
SIGNATURE:  RICHARD VELDMAN 3-29-04 958-231-5999		SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #	