

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004 8:00 am
Secretary of State

04-29-2004 90249 026 ***150.00

DOCUMENT # P97000037418

1. Entity Name
LONDON PRIDE, INC.



Principal Place of Business
**14100 WALSMINGHAM RD., #2
LARGO, FL 33774**

Mailing Address
**336 COREY AVENUE
ST. PETE BEACH, FL 33706**

3401001



2. Principal Place of Business
14100 WALSMINGHAM RD.

3. Mailing Address
14100 WALSMINGHAM RD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04262004 Chg-P CR2E034 (10/03)

City & State

City & State
LARGO FL

4. FEI Number
59-3447712

Applied For
Not Applied

Zip

Country

Zip
33774

Country
USA

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

6. Name and Address of Current Registered Agent

**GOODWIN, GERRY
14100 WALSMINGHAM RD., #2
LARGO, FL 33774**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)
14100 WALSMINGHAM RD.

City

FL

Zip Code

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**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **GOODWIN, GERRY**
STREET ADDRESS **313 44TH AVENUE**
CITY-ST-ZIP **ST. PETE BEACH, FL 33706**

TITLE **D** ☐ Delete
NAME **GOODWIN, KRYSIA**
STREET ADDRESS **313 44TH AVENUE**
CITY-ST-ZIP **ST. PETE BEACH, FL 33706**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Change ☐ Add
NAME
STREET ADDRESS **11360 HARBOR WAY #1661**
CITY-ST-ZIP **LARGO FL 33774**

TITLE **T.** ☒ Change ☐ Add
NAME
STREET ADDRESS **11360 HARBOR WAY #1661**
CITY-ST-ZIP **LARGO FL 33774**

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Add
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, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Gerry Goodwin

DATE **4-26-04**