

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000049127

FILED
Jan 28, 2004
Secretary of State

Entity Name: THE TOP SPOT, INCORPORATED

Current Principal Place of Business:

2706 S. HORSESHOE DR.
NAPLES, FL 34104

New Principal Place of Business:

Current Mailing Address:

2706 S. HORSESHOE DR.
NAPLES, FL 34104

New Mailing Address:

FEI Number: 59-3449902

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, F. EDWARD
821 5TH AVE., S., NAPLES
NAPLES, FL 34102

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: GREEN, ROGER D
Address: 891 GROVE DR.
City-St-Zip: NAPLES, FL 34108

Title: ST () Delete
Name: BAUS, COLLEEN
Address: 5528 SHOLTZ ST.
City-St-Zip: NAPLES, FL 34113

Title: P () Delete
Name: CANNARSA, MATTHEW
Address: 4421 1ST AVE SW
City-St-Zip: NAPLES, FL 34119

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change () Addition
Name: BAUS, COLLEEN P
Address: 330 PINEHURST CIRCLE
City-St-Zip: NAPLES, FL 34113

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: COLLEEN P BAUS

ST

01/28/2004

Electronic Signature of Signing Officer or Director

Date