

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Aug 17, 2004 8:00 am**  
**Secretary of State**

08-17-2004 90003 008 \*\*\*550.00

**DOCUMENT # P97000065929**

1. Entity Name

CPW FOUNDATION, INC.



Principal Place of Business:

REGENCY PALM APTS  
4113 E LINEBAUGH AVE  
TAMPA FL 33617  
US

Mailing Address

28128 SEWINDER LN  
ZEPHYRHILLS FL 33544

24080086



MOORE

CR2E034 (4/04)

2. Principal Place of Business

4113 E. Linebaugh Ave

3. Mailing Address

Suite, Apt. #, etc.

Apt 307

City & State

Tampa FL

Zip

33544

Country

US

Zip

Country

4. FEI Number

59-3467007

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

WILLIAMS, MARNIE R  
28128 SEWINDER LANE  
ZEPHYRHILLS FL 33544

7. Name and Address of New Registered Agent

Name  
Marnie Williams Bennett  
Street Address (P.O. Box Number is Not Acceptable)  
28128 Sewinder Ln  
Wesley Chapel  
City  
FL Zip Code  
33544

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

Marnie Bennett

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

8/4/04

DATE

**FILE NOW!!! FEE IS \$550.00**

**DUE BY September 8, 2004**

**Make Check Payable to Florida Department of State**

§ 607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. ☐

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	WILLIAMS, MARNIE R	
STREET ADDRESS	28128 SEWINDER LANE	
CITY-ST-ZIP	ZEPHYRHILLS FL 33544	
TITLE	D	<input type="checkbox"/> Delete
NAME	BENNETT, KIP E	
STREET ADDRESS	28128 SEWINDER LANE	
CITY-ST-ZIP	ZEPHYRHILLS FL 33544	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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:

Marnie Bennett

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/9/04

DATE

Daytime Phone #