

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000088346

FILED  
Mar 03, 2004  
Secretary of State

Entity Name: STEWART HOSPITALITY GROUP, INC.

## Current Principal Place of Business:

2401 W STATE RD 434  
117  
LONGWOOD, FL 32779 US

## New Principal Place of Business:

## Current Mailing Address:

2401 W STATE RD 434  
117  
LONGWOOD, FL 32779 US

## New Mailing Address:

FEI Number: 59-3475251      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STEWART, ROBERT E  
1005 MERIEN COURT  
OVIEDO, FL 32765 US

## Name and Address of New Registered Agent:

STEWART, ROBERT E  
2401 WEST STATE ROAD 434  
117  
LONGWOOD, FL 32779 US

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:

03/03/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: STEWART, ROBERT E  
Address: 1005 MERIEN COURT  
City-St-Zip: OVIEDO, FL 32765

Title: PD ( ) Delete  
Name: STEWART, JEFFREY E  
Address: 1005 MERIEN COURT  
City-St-Zip: OVIEDO, FL 32765

Title: VTD ( ) Delete  
Name: STEWART, BARRY D  
Address: 1005 MERIEN COURT  
City-St-Zip: OVIEDO, FL 32765

Title: SD ( ) Delete  
Name: STEWART, REBECCA S  
Address: 202 4TH AVE  
City-St-Zip: INDIALANTIC, FL 32903

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: SD (X) Change ( ) Addition  
Name: NAGEL, REBECCA S  
Address: 1005 MERIEN COURT  
City-St-Zip: OVIEDO, FL 32765

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: JEFFREY E. STEWART

PD

03/03/2004

Electronic Signature of Signing Officer or Director

Date