

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 17, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # P97000100097

1. Entity Name

CENTRAL FLORIDA C.N.C., INC.



Principal Place of Business

1300 WOODLAWN TERR  
CLEARWATER, FL 33765

Mailing Address

1300 WOODLAWN TERR  
CLEARWATER, FL 33765



03052003 No Chg-P CR2E034 (10/03)

4. FEI Number

59-3480903

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

MONROE, DONALD G  
1300 WOODLAWN TERR.  
CLEARWATER, FL 33755

**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

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  
Due by September 8, 2004**

9. Election Campaign Financing:  
Trust Fund Contribution ☐

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

In accordance with s. 607.193(2)(b), F.S., the  
corporation did not receive the prior notice

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
PTD  
MONROE, DONALD G  
1300 WOODLAWN TERR.  
CLEARWATER, FL 33755

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
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000000160615  
05/17/04-80006-014 150.00

**DO NOT WRITE  
IN THIS SPACE**

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 another like empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/04

727 796 3026