2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000101868

FILED Aug 11, 2004 Secretary of State

Entity Name: CHARLOTTE STATE FINANCIAL SERVICES, INC.

Current Principal Place of Business: New Principal Place of Business:

1100 TAMIAMI TRAIL

PORT CHARLOTTE, FL 33953

Current Mailing Address: New Mailing Address:

1100 TAMIAMI TRAIL

PORT CHARLOTTE, FL 33953

FEI Number: 65-0834210 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BROWN, CHARLES III

100 TAMIAMI TRAIL

BROWN, CHARLES III

1100 TAMIAMI TRAIL

PORT CHARLOTTE, FL 33953 US PORT CHARLOTTE, FL 33953 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: 08/11/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: PD (X) Change () Addition

Name:BROWN, CHARLES IIIName:BROWN, CHARLES IIIAddress:1100 TAMIAMI TRAILAddress:1100 TAMIAMI TRAIL

City-St-Zip: PORT CHARLOTTE, FL 33953 City-St-Zip: PORT CHARLOTTE, FL 33953

Title: S () Delete Title: SD (X) Change () Addition Name: WILSON, BRADLEY L Name: WILSON, BRADLEY L

Address: 1100 TAMIAMI TRAIL

City-St-Zip: PORT CHARLOTTE, FL 33953

City-St-Zip: PORT CHARLOTTE, FL 33953

Title: VP (X) Delete Title: () Change () Addition

 Name:
 BURKE, JANET
 Name:

 Address:
 1100 TAMIAMI TRAIL
 Address:

 City-St-Zip:
 PORT CHARLOTTE, FL 33954
 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: BRADLEY L. WILSON SD 08/11/2004