

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90230 001 ***150.00

DOCUMENT # P98000008233

1. Entity Name
THE PERFECT WEDDING GUIDE, INC.



Principal Place of Business
1206 N. CR 427
LONGWOOD, FL 32750 US

Mailing Address
1206 N. CR 427
LONGWOOD, FL 32750 US

14010800



2. Principal Place of Business
37 Skyline Drive
Suite, Apt. #, etc.
Ste 1101

3. Mailing Address
37 Skyline Drive
Suite, Apt. #, etc.
Ste 1101

04192004 Chg-P CR2E034 (10/03)

City & State
Lake Mary FL
Zip 32746 Country USA

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Lake Mary FL
Zip 32746 Country USA

4. FEI Number
59-3498110
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MCGRODER, PATRICK
1206 N. CR 427
LONGWOOD, FL 32750-3018

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
37 Skyline Drive Ste 1101
City Lake Mary FL Zip Code 32746

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME MCGRODER, PATRICK
STREET ADDRESS 1206 N. CR 427
CITY-ST-ZIP LONGWOOD, FL 327503018 ☐ Delete

TITLE D
NAME MCGRODER, CHRISTINE A
STREET ADDRESS 1206 N. CR 427
CITY-ST-ZIP LONGWOOD, FL 327503018 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS 37 Skyline Drive Ste 1101
CITY-ST-ZIP Lake Mary, FL 32746 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS 37 Skyline Drive Ste 1101
CITY-ST-ZIP Lake Mary, FL 32746 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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: Patrick J. McGroder 4-26-04 407-936-0380
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #