

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000026414

FILED
Apr 29, 2004
Secretary of State

Entity Name: ANTRACE, INC.

Current Principal Place of Business:

4377 COMMERCIAL WAY
SPRING HILL, FL 34608 US

New Principal Place of Business:

Current Mailing Address:

10067 NORTHWIND COURT
SPRING HILL, FL 34608

New Mailing Address:

FEI Number: 59-3504277

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUMMINGS, TRACY
10067 NORTHWIND COURT
SPRING HILL, FL 34608

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CUMMINGS, TRACY
Address: 10067 NORTHWIND CT
City-St-Zip: SPRINGHILL, FL 34608

Title: VP () Delete
Name: HEWITT, ANITA
Address: 449 S WINDING OAKS DR
City-St-Zip: HOMOSASSA, FL 34446

Title: TD () Delete
Name: CUMMINGS, DAVID
Address: 10067 NORHTWIND CT.
City-St-Zip: SPRING HILL, FL 34608

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:

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: TRACY CUMMINGS

P

04/29/2004

Electronic Signature of Signing Officer or Director

_____ Date