## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000030341

Entity Name: MAST, INC.

FILED Mar 09, 2004 Secretary of State

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

284 JUSTENE CIR 910 PALMETTO AVE

LEHIGH ACRES, FL 33936 LEHIGH ACRES, FL 33936

Current Mailing Address: New Mailing Address:

284 JUSTENE CIR 910 PALMETTO AVE

LEHIGH ACRES, FL 33936 LEHIGH ACRES, FL 33936

FEI Number: 65-0826038 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:

HAST, DENNIS J
284 JUSTENE CIRCLE
HAST, DENNIS J
910 PALMETTO AVE

LEHIGH ACRES, FL 33936 US LEHIGH ACRES, FL 33936 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: 03/09/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 HAST, DENNIS
 Name:
 MAST, DENNIS

 Address:
 17650 OAK CR RD
 Address:
 910 PALMETTO AVE

 City-St-Zip:
 ALVA, FL 33920
 City-St-Zip:
 LEHIGH ACRES, FL 33936

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition Name: HAST, DEBORAH Name: MAST, DEBORAH

 Name:
 HAST, DEBORAH
 Name:
 MAST, DEBORAH

 Address:
 17650 OAK CR RD
 Address:
 910 PALMETTO AVE

 City-St-Zip:
 ALVA, FL 33920
 City-St-Zip:
 LEHIGH ACRES, FL 33936

Title: S ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 WENRICH, RON
 Name:

 Address:
 414 8TH AVE
 Address:

 City-St-Zip:
 LEHIGH ACRES, FL 33936
 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: DENNIS J MAST PRES 03/09/2004