## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## May 24, 2004 08:00 AM Secretary of State DOCUMENT # P98000034039 1. Entity Name JERRY'S SEAFOOD, INC. Principal Place of Business Mailing Address 12851 WHIDDON AVENUE P.O. BOX 724 CEDAR KEY, FL 32625 CEDAR KEY, FL 32625 03122003 8008000 0.8.08.908333333333 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3507890 Not Applicable \$8.75 @0000000 5. Certificate of Status Desired CITCOR CICCORDER 6. Name and Address of Current Registered Agent WRIGHT, KATHY DO NOT WRITE 16491 PAROPA AVE CEDAR KEY, FL 32625 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. DATE (NOTE Registered Agent signature required when reinstating) FILE NOWILL FEE IS \$150.00 9. Election Campaign Financing \$5.00 B BBBBB In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. corporation did not receive the prior notice. Due by September 8, 2004 OFFICERS AND DIRECTORS 10. PTD TITLE NAME BECKHAM, JERALD W SR STREET ADDRESS 12851 WHIDDON AVE U00000161328 05/24/04-80004-001 150.00 CHY-ST- DP CEDAR KEY, FL 32625 BECKHAM, CARMEN L NAME STREET ADDRESS 12851 WHIDDON AVE CITY-ST-ZIP CEDAR KEY, FL 32625 TITLE NAME STREET ACDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TOSE

12. I hereby certify that the information supplied with this filling 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 attachapter with an appropriate like empowered.

SIGNATURE: CRUCK 21 Bell Alum SI

NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
HTLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CITY-ST-ZIP
CITY-ST-ZIP
CITY-ST-ZIP
CITY-ST-ZIP
CITY-ST-ZIP

4/30/04 (352)543-997

**FILED**