2004 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P98000041983

1. Entity Name
SIMPLY BANNERS, INC.

Principal Place of Business	Mailing Address
12956 POND APPLE DRIVE WEST NAPLES, FL 34119	12956 POND APPLE DRIVE WEST NAPLES, FL 34119

DO NOT WRITE IN THIS SPACE

04052004   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
59-3512932	Not Applicable

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

6. Name and Address of Current Registered Agent

COAR, GARY J PRES
12956 POND APPLE DRIVE WEST
NAPLES, FL 34119

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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.   (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

U000000112617
04/14/04-80030-019 150.00

10.	OFFICERS AND DIRECTORS
TITLE	PRES
NAME	COAR, GARY
STREET ADDRESS	12956 POND APPLE DRIVE WEST
CITY-ST-ZIP	NAPLES, FL 34119
TITLE	VP
NAME	COAR, KATHLEEN
STREET ADDRESS	12956 POND APPLE DRIVE WEST
CITY-ST-ZIP	NAPLES, FL 34119
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: _Gary Coar_   4-9-04   239.594-2512

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #