

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000057449

FILED
Apr 10, 2004
Secretary of State

Entity Name: NECESSARY VENTURES, INC.

Current Principal Place of Business:

1400 PEREGRINE PT. DR.
SARASOTA, FL 34231

New Principal Place of Business:

800 SOUTH OSPREY AVENUE
SARASOTA, FL 34236

Current Mailing Address:

1400 PEREGRINE PT. DR.
SARASOTA, FL 34231

New Mailing Address:

800 SOUTH OSPREY AVENUE
SARASOTA, FL 34236

FEI Number: 65-0846197

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LONSDALE, ROBERT D
1400 PEREGRINE PT. DR.
SARASOTA, FL 34231

Name and Address of New Registered Agent:

LONSDALE, ROBERT D
800 SOUTH OSPREY AVENUE
SARASOTA, FL 34236

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: _____

04/10/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LONSDALE, ROBERT D
Address: 1400 PEREGRINE PT. DR.
City-St-Zip: SARASOTA, FL 34231

Title: D () Delete
Name: LONSDALE, KRISTY K
Address: 1400 PEREGRINE PT. DR.
City-St-Zip: SARASOTA, FL 34231

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LONSDALE, ROBERT D
Address: 800 SOUTH OSPEY AVENUE
City-St-Zip: SARASOTA, FL 34236

Title: D (X) Change () Addition
Name: LONSDALE, KRISTY K
Address: 800 SOUTH OSPEY AVENUE
City-St-Zip: SARASOTA, FL 34236

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: ROBERT D LONSDALE

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04/10/2004

Electronic Signature of Signing Officer or Director

Date