


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

Apr 26, 2004 08:00 AM
Secretary of State

DOCUMENT # P98000075161 1. Entity Name CROSBY SNACKS, INC.	
--	---

Principal Place of Business HEADQUARTERS BUILDING ROOM 3602 KENNEDY SPACE CENTER, FL 32899	Mailing Address HEADQUARTERS BUILDING ROOM 3602 KENNEDY SPACE CENTER, FL 32899
--	--



04092004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3533461	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent CROSBY, RANDALL D 1286 LITTLE OAK CIR TITUSVILLE, FL 32780
--

**DO NOT WRITE
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	---

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CROSBY, RANDALL D 1286 LITTLE OAK CIR TITUSVILLE, FL 32780
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CROSBY, PATRICIA C 1286 LITTLE OAK CIR TITUSVILLE, FL 32780
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	

U000000129740
04/26/04-80089-023 150.00

**DO NOT WRITE
IN THIS SPACE**

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: <i>Randall Crosby</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<i>4-21-04 (321)867-3763</i> <small>Date Daytime Phone #</small>