

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2004 8:00 am
Secretary of State

04-21-2004 90031 048 ***150.00

DOCUMENT # P98000076041

1. Entity Name
MAHONEY SEAFOOD PRODUCTS, INC.



Principal Place of Business
**6275 PINE AVENUE
ORANGE PARK, FL 32073**

Mailing Address
**6275 PINE AVENUE
ORANGE PARK, FL 32073**

94058103



2. Principal Place of Business
6275 Pine Avenue
Suite, Apt. #, etc.

3. Mailing Address
6275 Pine Avenue
Suite, Apt. #, etc.

04182004 Chg-P CR2E034 (10/03)

City & State
Orange Park, FL
Zip
32003 Country
U.S.

City & State
Orange Park, FL
Zip
32003 Country
U.S.

4. FEI Number
59-3531486 Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**MAHONEY, JOSEPH J
6275 PINE AVENUE
ORANGE PARK, FL 32073**

7. Name and Address of New Registered Agent

Name
Mahoney, Joseph J
Street Address (P.O. Box Number is Not Acceptable)
6275 Pine Avenue
City
Orange Park FL Zip Code
32003

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 *Joseph J Mahoney*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4-19-04
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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PVST
MAHONEY, JOSEPH J
6275 PINE AVENUE
ORANGE PARK, FL 32073** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
MAHONEY, JOSEPH J
6275 PINE AVENUE
ORANGE PARK, FL 32073** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PVST
Mahoney, Joseph J
6275 Pine Avenue
Orange Park, FL 32003** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
Mahoney, Joseph J
6275 Pine Avenue
Orange Park, FL 32003** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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: *Joseph J Mahoney*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-19-04 904-860-0465
Date Daytime Phone #