

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 23, 2004 8:00 am**  
**Secretary of State**

04-23-2004 90245 042 \*\*\*150.00

**DOCUMENT # P98000084115**

1. Entity Name  
**SUMTER CROSSING PROPERTIES, INC.**



Principal Place of Business

**411 COMMERCIAL COURT  
SUITE E  
VENICE, FL 34292**

Mailing Address

**411 COMMERCIAL COURT  
SUITE E  
VENICE, FL 34292**

34061100



**DO NOT WRITE IN THIS SPACE**

04142004 No Chg-P CR2E034 (10/03)

4. FEI Number  
**59-3629811**

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**BINGHAM, JAMES H  
411 COMMERCIAL COURT  
SUITE E  
VENICE, FL 34292**

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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.

(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

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	BINGHAM, JAMES H
STREET ADDRESS	411 COMMERCIAL COURT, SUITE E
CITY-ST-ZIP	VENICE, FL 34292
TITLE	DVST
NAME	OAKLEY, THOMAS E
STREET ADDRESS	101 ABC ROAD
CITY-ST-ZIP	LAKE WALES, FL 33853
TITLE	DVP
NAME	MCCORMIC, DANIEL C
STREET ADDRESS	9288 COUNTY ROAD 121
CITY-ST-ZIP	WILDWOOD, FL 34785
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 filers empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**JAMES H. BINGHAM**

**4/21/04**

Date

**941-488-0270**

Daytime Phone #