

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90250 014 ***150.00

DOCUMENT # P99000020820

1. Entity Name
OUR ASSET, INC.



Principal Place of Business

1203 1ST STREET SW
RUSKIN, FL 33570

Mailing Address

1203 1ST STREET SW
RUSKIN, FL 33570

24058043



DO NOT WRITE IN THIS SPACE

02172004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-3562529

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DAVIS, ANNE W
1203 1ST STREET SW
RUSKIN, FL 33570

**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

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 ☐ ☐ ☐ ☐
☐ ☐ ☐ ☐ ☐ ☐

10. OFFICERS AND DIRECTORS

TITLE PD
NAME COUNCIL, SANDRA R
STREET ADDRESS 1203 1ST STREET SW
CITY-ST-ZIP RUSKIN, FL 33570

TITLE STD
NAME DAVIS, ANNE W
STREET ADDRESS 414 4TH STREET SW
CITY-ST-ZIP RUSKIN, FL 33570

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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 like empowerers.

SIGNATURE: *Anne W. Davis*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-27-04 *813 645-7710*