2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 19, 2004 08:00 AM Secretary of State

DOCUMENT # P 1. Entity Name OT PURSUITS, INC.	99000031636) 1			Secret	-
Principal Place of Business 1215 O'MEARA COURT NEWPORT RICHEY, FL 34655	1.	iling Address 215 O'MEARA COURT EWPORT RICHEY, FL 34655				
DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent				02042004 No Chg-P CR2E034 (10/03) 4. FEI Number		
OTEY, DONALD V					NOT WOU	
1215 OMEARA COURT NEW PORT RICHEY, FL 34655			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 printe	ed name of registered agent and this	f applicable. (NOTE Register)	ed Agent signature (eguin	ed when (einstading)	DA	re
FILE NOWI!! FEE 13 \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campalgn Finan Trust Fund Contribution.				5.00 May Be	_U000000577	
10.	OFFICERS AND DIREC	CTORS			<u> </u>	12-023 130.13
NAME OTEY, JO E STREET ADDRESS 1215 O'MEARA	A CT CHEY, FL 34655					7
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRI	ΓΕ
TITLE NAME STREET ADDRESS GITY-ST-ZIP				IN T	THIS SPAC	E
TITLE NAME STREET ADDRESS CITY-SI-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
I hereby certify that the info indicated on this report or s of the corporation or the rechanged, or on an attachm.	mation supplied with this fupplemental report is true either or trustee empowerent with an address, with a	ling does not qualify for the ex and accurate and that my sign of to execute this report as requ I other like empowered.	emption stated in S ature shall have the sired by Chapter 6	Section 119.07(3) e same legal effec 07, Florida Statute	(i), Florida Statutes, I further of as if made under oath, the es, and that my name appear	certify that the information at I am an officer or director ars in Block 10 or Block 11 if

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATOR OFFICER OR DIRECTOR

SIGNATURE: