

FILED

Jan 28, 2005 08:00
Secretary of Stat**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P99000052050 1. Entity Name GENEVA HOLDINGS INC.			
Principal Place of Business 1836 GRINNELL TERRACE. WINTER PARK, FL 32789		Mailing Address 1836 GRINNELL TERRACE. WINTER PARK, FL 32789	
DO NOT WRITE IN THIS SPACE			
6. Name and Address of Current Registered Agent HEYWORTH-DAVIS, SIMON J 1836 GRINNELL TERRACE WINTER PARK, FL 32789		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 _____ (NOTE: Registered Agent signature required when reconstituting) _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable.			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees 01/28/05-80098-018 150.00	
10. OFFICERS AND DIRECTORS			
TITLE	TS	DO NOT WRITE IN THIS SPACE	
NAME	HEYWORTH-DAVIS, SIMON J		
STREET ADDRESS	2600 WESTERN PARKWAY		
CITY-ST-ZIP	ORLANDO, FL 32803		
TITLE	D		
NAME	MARK, F. GORDEN		
STREET ADDRESS	3875 INDIAN RIVER DR.	DO NOT WRITE IN THIS SPACE	
CITY-ST-ZIP	COCOA, FL 32922		
TITLE	D		
NAME	WARD, WILLIAM		
STREET ADDRESS	2229 BUTLER BAY DR. N.		
CITY-ST-ZIP	WINDERMERE, FL 34786		
TITLE		DO NOT WRITE IN THIS SPACE	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS		DO NOT WRITE IN THIS SPACE	
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: SIMON J. HEYWORTH-DAVIS SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		25 Jan '05 4075395776 Date Daytime Phone #	