

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000059901

FILED  
Mar 15, 2004  
Secretary of State

Entity Name: OCEAN STATE EVENT SERVICES, INC.

## Current Principal Place of Business:

328 SOUTH INDIANA AVENUE  
LAKELAND, FL 33801

## New Principal Place of Business:

139 SOUTH FLORIDA  
LAKELAND, FL 33801

## Current Mailing Address:

PO BOX 2688  
LAKELAND, FL 33806

## New Mailing Address:

FEI Number: 59-3589453      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CROTTY, KATHLEEN L  
1800 W. INTERNATIONAL SPEEDWAY BLVD  
BLDG 2., SUITE 201  
DAYTONA BEACH, FL 32114 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: WENDT, TIMOTHY  
Address: 649 SOUTH PINE STREET  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: VPSD ( ) Delete  
Name: WALDROP, BRENDA  
Address: 601 SOUTH INGRAHAM AVENUE  
City-St-Zip: LAKELAND, FL 33801

Title: TD ( ) Delete  
Name: GRENIER, ROBERT JR  
Address: 6 NORTHRUP PLAT RD  
City-St-Zip: COVENTRY, RI 02816

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRENDA WALDROP

VPSD

03/15/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date