2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000061048

1. Entity Name
THE VAN DUZER CORPORATION OF FLORIDA



Apr 26, 2004 8:00 am Secretary of State 04-26-2004 90453 027 ***150.00

FILED

Principal Place	e of Business	Mailing Address						
5615 LEWIS ST. FT. MYERS BEACH, FL 33931		5615 LEWIS ST. FT. MYERS BEACH, FL 33931						
				04082004 No Chg-P CR2E034 (10/03)				
D	O NOT WRITE	IN THIS SPA	CE	4. FEI Number 35-1928	 325		Applied For Not Applicable	
				5. Certificate of			\$8.75 Additional Fee Required	
	6. Name and Address of Current R	legistered Agent				*		
5615 LEW	ER, WILLIAM IS ST. S BEACH, FL 33931	يور مستند هم ميوريد او د او د هم	and Section through the section of		NOT-WE HIS SPA			
the obligat	named entity submits this statement for ions of registered agent.				in the State of Flori		r with, and accept	
. لمت	Signature, typed-or printed name of registered egent ar		red Agent signature requi	red when reinstating)	. 14-	DATE	· · · · · · · · · · · · · · · · · · ·	
FILI After M	E NOW!!! FEE IS \$150.00 by 1, 2604 Fee will be \$550.0	9. Election Campaign Fine Trust Fund Contribution		5.00 May Be ided to Fees		-	record of the advance on	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAN DUZER, WILLIAM 5615 LEVMS ST. FT. MYERS BEACH, FL 33931	DIRECTORS THE TOTAL TO A STATE OF THE PROPERTY	en en en en	्रेक्टिक दुवर्ग है। इन्हें के सम्बद्धार है	e de la companya de l	Andrew State Control	A CONTRACTOR OF THE CONTRACTOR	
TITLE	6			*				
NAME STREET ADDRESS CITY-ST-ZIP				DO I	NOT WI	RITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					HIS SP		the later of the later sections.	
NAME STREET ADDRESS CITY-ST-ZIP					THE STATE OF THE S		,	
NAME :	This was a company of the company of	-		х		•		
12. I hereby	certify that the information supplied with on this report or suppliemental report is	this filing does not qualify for the ex	cemption stated in the	Section 119.07(3)(i), e same legal effect	Florida Statutes. I f	urther certify the	at the information	

of the corporation or the receiver or trustee empowered to execute this report as regulred 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 to the composition of the composition of the receiver or trustee empowered to execute this report as regulred 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:

SIGNATU