

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000078424

FILED  
Aug 17, 2004  
Secretary of State

Entity Name: PRESSTIME PRINTING & GRAPHICS, INC.

**Current Principal Place of Business:**

650 8TH ST.  
CLERMONT, FL 34711

**New Principal Place of Business:**

**Current Mailing Address:**

650 8TH ST.  
CLERMONT, FL 34711

**New Mailing Address:**

FEI Number: 59-3639941

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WILSON, LISA M  
650 8TH ST.  
CLERMONT, FL 34711

**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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: WILSON, LISA M  
Address: 650 8TH ST.  
City-St-Zip: CLERMONT, FL 34711

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: PRES ( ) Change (X) Addition  
Name: WILSON, LISA M PRES.  
Address: 650 EIGHTH STREET  
City-St-Zip: CLERMONT, FL 34711 21

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: LISA M. WILSON

PRES

08/17/2004

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

\_\_\_\_\_  
Date