

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 03, 2004 8:00 am**  
**Secretary of State**

05-03-2004 91013 042 \*\*\*150.00

**DOCUMENT # P99000084930**

1. Entity Name  
**C & L LOFTS, INC.**



Principal Place of Business  
**37 NORTH ORANGE AVE STE 1050  
ORLANDO, FL 32801**

Mailing Address  
**37 NORTH ORANGE AVE STE 1050  
ORLANDO, FL 32801**

2. Principal Place of Business  
**37 North Orange Ave**  
Suite Apt. #, etc.  
**760**

3. Mailing Address  
**37 North Orange Ave**  
Suite Apt. #, etc.  
**760**

City & State  
**ORLANDO, FL**

City & State  
**ORLANDO, FL**

04262004 Chg-P CR2E034 (10/03)

4. FEI Number  
**59-3601040**

Applied For  
Not Applicable

Zip  
**32801**

Country  
**Orange**

Zip  
**32801**

Country  
**Orange**

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**KUHN, CAMERON B  
37 NORTH ORANGE AVE  
STE 1760 760  
ORLANDO, FL 32801**

**7. Name and Address of New Registered Agent**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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 printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PD  
KUHN, CAMERON B  
37 NORTH ORANGE AVE STE 1050  
ORLANDO, FL 32801** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VP  
HUSSEY, JOHN  
37 NORTH ORANGE AVE STE 1050  
ORLANDO, FL 32801** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PD  
Kuhn, Cameron  
37 N. Orange Ave Ste 760  
Orlando, FL 32801** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VP  
Hussey, John  
37 North Orange Ave, Ste 760  
Orlando, FL 32801** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/28/04 407 543-1111**  
Date Daytime Phone #