2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 30, 2004
Secretary of State

DOCUMENT# P99000097370

Entity Name: 12420 SUMMERPORT BEACH , INC.

Current Principal Place of Business:

PO BOX 8361
TAMPA, FL 336748361

New Principal Place of Business:

Current Mailing Address:

PO BOX 8361
TAMPA, FL 336748361

New Mailing Address:

FEI Number: 59-3611954 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KEATING, JOHN K
749 NORTH GARLAND STE 101
ORLANDO, FL 32801

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: D ( ) Delete
Name: GORDY, SUSAN B
Address: 1135 OVERBROOK DRIVE
City-St-Zip: ORLANDO, FL 32804

Title: D ( ) Delete
Name: HOLSON, BRENDA B
Address: 846 LAKE HOWELL ROAD
City-St-Zip: MAITLAND, FL 32751

Title: D ( ) Delete
Name: BROWN, WILLIAM A
Address: PO BOX 9127
City-St-Zip: TAMPA, FL 33674

Title: D ( ) Delete
Name: BROWN, THOMAS H
Address: PO BOX 1300
City-St-Zip: EUTIS, FL 327271300

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:

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: WILLIAM A. BROWN D 06/30/2004

Electronic Signature of Signing Officer or Director — Date