2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE AND TYPED OR PRINTED N

Feb 09, 2004 8:00 am **DOCUMENT # P99000109030 Secretary of State** 1. Entity Name 02-09-2004 90060 011 ***150.00 PHOENIX INTEGRATED TECHNOLOGIES, INC. Principal Place of Business Mailing Address 106 VEDRA LANDING COURT 106 VEDRA LANDING COURT JAULAUJU PONTE VEDRA, FL 32082 PONTE VEDRA, FL 32082 2. Principal Place of Business 3. Mailing Address 47 Mount Vernon Lane 47 Mount Vernon Lane Suite, Apt. #, etc. Suite, Apt. #, etc. 02022004 CR2E034 (10/03) City & State City & State 4. FEI Number Applied For Palm Coast Palm Coast FL 30164 59-3614246 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 32164 USÁ UŚA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent <u>Loretta Senne</u> SENNE, LORETTA Street Address (P.O. Box Number is Not Acceptable). 47 Mount Vernon Lane 106 VEDRA LANDING COURT - - -PONTE VEDRA BEACH, FL 32082 City Zip Code Palm Coast 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. Loretta Senné SIGNATURE. Signature, typed or printed name of registered agent and \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE Ρ ☐ Change ☐ Addition NAME SENNE, DENNIS R NAME Senne, Dennis R STREET ADDRESS 106 VEDRA LANDING COURT STREET ADDRESS 47 Mount Vernon Lane CITY-ST-ZIP PONTE VEDRA, FL 32082 CITY-ST-ZIP <u>Palm Coast, FL 32164</u> TITLE ☐ Delete TITLE ☐ Change ST Addition SENNE, LORETTA NAME NAME Senne, Loretta STREET ADDRESS 106 VEDRA LANDING COURT STREET ADDRESS 47 Mount Vernon Lane Palm Coast, FL 32164 CITY-ST-ZIP PONTE VEDRA, FL 32082 CITY-ST-ZIP Delete TITI F TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7P CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CTY-ST-7P TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Channe ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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. Loretta Senne 904-591-3484 SIGNATURE: __

FILED