2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

Feb 03, 2004 08:00 AM DOCUMENT # S12435 **Secretary of State** 1. Entity Name SPRING HILL PRINTING PLUS, INC. Principal Place of Business Mailing Address 11063 HEARTH RD 11063 HEARTH RD SPRING HILL FL 34608 SPRING HILL FL 34608 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc Suite, Apr. #, etc. CR2E034 (11/03) City & State City & State 4. FEI Number Applied For 59-3038393 Not Applicable Zin Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LOVE, ROY G W Street Address (P.O. Box Number is Not Acceptable) 1326 BENTLEY AVE SPRING HILL FL 34608 City 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, 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 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE OPT TITLE Delete Change Addition LOVE, ROY G W NABRE 32.2.55 1326 BENTLEY AVE STREET ADDRESS STREET ADDRESS U00000032839 CITY-ST-ZP SPRING HILL FL 3460B CITY-ST-ZIP 150.00TITELE DVS ☐ Delete BBLE Change Addition LOVE, KELLY NAME NAME STREET ADDRESS 1326 BENTLEY AVE STREET ADDRESS CITY - ST- ZIP SPRING HILL FL 34608 CITY-ST- RP Delete TITLE me Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-23P TITLE Delete TITLE Change Addition NAME MAME STREET ADDRESS STREET ADDRESS CHTY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Chance Chance Addition NAME MAME STREET ADDRESS STREET ADDRESS CTTY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CETY-ST-ZEP 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.

FILED

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