

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

\$150.00
FILED

04 APR -1 AM 11:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01212004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3034862	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**DO NOT WRITE
IN THIS SPACE**

CURTIS, JOHN M.
11635 NW 1ST AVE.
GAINESVILLE, FL 32607

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	VD
NAME	HODOR, HOWARD
STREET ADDRESS	2700 NW 43RD ST.
CITY-ST-ZIP	GAINESVILLE, FL
TITLE	PTD
NAME	CURTIS, JOHN M.
STREET ADDRESS	11635 NW 1ST AVE.
CITY-ST-ZIP	GAINESVILLE, FL
TITLE	S
NAME	CURTIS, GAIL W.
STREET ADDRESS	11635 NW 1ST AVE.
CITY-ST-ZIP	GAINESVILLE, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/28/04--01020--030 **150.00

**DO NOT WRITE
IN THIS SPACE**

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: John M. Curtis **President** 01/23/04 352-332-0838
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #