2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S32892

FILED Apr 30, 2004 Secretary of State

Entity Name: DESIGN SCAPES OF MANASOTA, INC. **Current Principal Place of Business: New Principal Place of Business:** 7840 FRUITVILLE ROAD SARASOTA, FL 34240 US **Current Mailing Address: New Mailing Address:** 7840 FRUITVILLE ROAD SARASOTA, FL 34240 US FEI Number: 65-0243756 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GICZEWSKI, JAMES ROBERT 4000 ARROW AVE SARASOTA, FL 34232 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition GICZEWSKI, JAMES R Name: Name: 4000 ARROW AVE Address: Address: SARASOTA, FL 34232 City-St-Zip: City-St-Zip: Title: Title: () Delete (X) Change () Addition GICZEWSKI, MARIA Name: GICZEWSKI, MARIA Name: 4000 ARROW AVE 4000 ARROW AVE Address: Address: SARASOTA, FL 34232 SARASOTA, FL 34232 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change (X) Addition GICZEWSKI, ROBERT J Name: Name: 4865 DEER RIDGE DRIVE SOUTH Address Address: City-St-Zip: City-St-Zip: CARMEL, IN 46033 Title: () Delete Title: () Change (X) Addition GICZEWSKI, MARY G Name: Name: Address: Address: 4865 DEER RIDGE DRIVE SOUTH City-St-Zip: City-St-Zip: CARMEL, IN 46033

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.

Ρ SIGNATURE: JAMES R. GICZEWSKI 04/30/2004