FILED
Apr 12, 2004 08:00 AM
Secretary of State

2004 FOR PROFIT CORPORATION -ANNUAL REPORT

S49753
1. Entity Name
MAGGIE V CORPORATION

Principal Place of Business	Mailing Address
231 DOUGLAS RD. E., STE 1 OLDSMAR, FL 34677	231 DOUGLAS RD. E., STE 1 OLDSMAR, FL 34677

DO NOT WRITE IN THIS SPACE

04062004

4. FEI Number
59-3066918
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75**

6. Name and Address of Current Registered Agent

ROEFARO, GENE
231-A DOUGLAS ROAD
UNIT 1
OLDSMAR, FL 34677

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00**

000000108641
04/12/04-80011-021 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	ROEFARO, GENE
STREET ADDRESS	231 DOUGLAS ROAD E #1
CITY-ST-ZIP	OLDSMAR, FL 346772943
TITLE	VTS
NAME	DONAHEY, JOSEPH
STREET ADDRESS	50 WOODGLEN COURT
CITY-ST-ZIP	OLDSMAR, FL 346772943
TITLE	D
NAME	DONAHEY, JOSEPH G JR
STREET ADDRESS	50 WOODGLEN COURT
CITY-ST-ZIP	OLDSMAR, FL 346772943
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: _____ 4-7-04 727-789-3008
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

JOSEPH G DONAHEY JR