# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 30, 2004**
**Secretary of State**

DOCUMENT# S67496

**Entity Name:** FINACO FINANCIAL, INC.

**Current Principal Place of Business:**

7300 CRILL AVE
PALATKA, FL 32177 US

**New Principal Place of Business:**

**Current Mailing Address:**

7300 CRILL AVE
#65
PALATKA, FL 32177 US

**New Mailing Address:**

**FEI Number: 59-3076510** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HERRINGTON, WILLIAM J JR
7300 CRILL AVE
#65
PALATKA, FL 32177 US

**Name and Address of New Registered Agent:**

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:**

Title: CEOP ( ) Delete
Name: HERRINGTON, WILLIAM, J JR
Address: 7324 CRILL AVE
City-St-Zip: PALATKA, FL 32177

Title: C ( ) Delete
Name: WISHEN, NATHAN A
Address: 771 MOODY RD
City-St-Zip: PALATKA, FL 32177

Title: D ( ) Delete
Name: LYTTON, PATRKIA L
Address: 2601 OAK ST
City-St-Zip: PALATKA, FL 32177

Title: D ( ) Delete
Name: WISHON, NATHAN A
Address: 771 MEED ROAD
City-St-Zip: PALATKA, FL 32177

Title: D ( ) Delete
Name: HUDSON, JACK R
Address: 110 KYTE ROAD
City-St-Zip: SAN MATEO, FL 32187

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: C (X) Change ( ) Addition
Name: WISHON, NATHAN A
Address: 771 MOODY RD
City-St-Zip: PALATKA, FL 32177

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: WISHON, NATHAN A
Address: 771 MOODY RD
City-St-Zip: PALATKA, FL 32177

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: WILLIAM J. HERRINGTON, JR COEP 04/30/2004

Electronic Signature of Signing Officer or Director — Date