


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

Feb 25,  
Secr

DOCUMENT # 599023		
1. Entity Name J.K. NICHOLAS & COMPANY, INC.		
Principal Place of Business 116 MORNINGSIDE DRIVE CORAL GABLES, FL 33133	Mailing Address 116 MORNINGSIDE DRIVE CORAL GABLES, FL 33133	



02222004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-1875858</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

NICHOLAS, WOODROW W  
116 MORNINGSIDE DRIVE  
CORAL GABLES, FL 33133

**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 reconstituting) \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	1000000065435 02/25/04-80037-017 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P NICHOLAS, WOODROW 116 MORNINGSIDE DRIVE CORAL GABLES, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST NICHOLAS, FRANKIE 116 MORNINGSIDE DRIVE CORAL GABLES, FL
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(b), 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: Woodrow W. Nicholas Feb 22-04 305-667-0310  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #