


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 12, 2004 8:00 am**  
**Secretary of State**

02-12-2004 90022 013 \*\*\*150.00

<b>DOCUMENT # 617805</b> 1. Entity Name <b>RICHARD D. RUPP ASSOCIATES, INC.</b>					
Principal Place of Business <b>367 WILSON STREET DUNEDIN FL 34698 US</b>			Mailing Address <b>2161 CEDAR DRIVE DUNEDIN FL 34698</b>		
2. Principal Place of Business  Suite, Apt. #, etc.		3. Mailing Address <b>367 WILSON STREET</b>  Suite, Apt. #, etc.			
City & State		City & State <b>DUNEDIN FL</b>		4. FEI Number <b>59-1904232</b> <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
Zip -- --	Country -- --	Zip <b>34698</b>	Country <b>PINELLAS</b>	5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>RUPP, RICHARD D 2161 CEDAR DR DUNEDIN FL</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
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 _____					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>RUPP, RICHARD D.</b> <b>2161 CEDAR DR.,</b> <b>DUNEDIN FL</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> <b>RUPP, R. DANIEL</b> <b>1810 OAKMOUNT CT</b> <b>SAFETY HARBOR FL</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ST</b> <b>RUPP, MARY JEAN</b> <b>2161 CEDAR DR.</b> <b>DUNEDIN FL</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
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 60, 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 amendments.					
<b>SIGNATURE:</b> <i>Richard D. Rupp</i> <b>RICHARD D. RUPP</b> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					



MOORE CR2E034 (11/03)

Date 2/6/04 Daytime Phone # 747-248-4465