2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 637542

ty Name: HUME & JOHNSON P

WALTERS, DONALD

1401 UNIVERSITY DR

CORAL SPRINGS, FL 33071

Name:

Address:

City-St-Zip:

FILED Jan 13, 2004 Secretary of State

Entity Na	me: HUME&	JOHNSON P.A.			
Current Principal Place of Business:			New Principal Place of Business:		
	/ERSITY DRIV PRINGS, FL 3				
Current Mailing Address:			New Mailing Address:		
	/ERSITY DRIV PRINGS, FL 3				
FEI Number	: 59-1936414	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
HUME, JC 1401 UNI\ CORAL SI	OHN /ERSITY DRIV PRINGS, FL 3	E, SUITE 301 30713039			
	e named entity e of Florida.	submits this statement for the	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATU	RE:				
	Electror	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D (HUME, JOHN, 1401 UNIVERS CORAL SPRIN		Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	PD (JOHNSON, HEI 1401 UNIVERS CORAL SPRIN	ITY DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DV (ZIPPAY, CATH 1401 UNIVERS CORAL SPRIN	ITY DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	TD (. Delete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JOHN HUME D 01/13/2004