2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2004 8:00 am
Secretary of State
04-12-2004 90303 009 ***150.00

DOCUMENT # F59900

1. Entity Name
CHRISTOPHER, SMITH, LEONARD, BRISTOW, STANELL & WELLS, P.A.

Principal Place of Business
1001 3RD AVENUE WEST, SUITE 700
BRADENTON, FL 34205

Mailing Address
P. O. BOX 1251
BRADENTON, FL 34206-1251

03162004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2142260
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CHRISTOPHER, ROBERT E.
1001 THIRD AVE WEST SUITE 700
BRADENTON, FL 34205

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

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

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	VDT
NAME	SMITH, RICHARD D.
STREET ADDRESS	4915 18 AVE W
CITY-ST-ZIP	BRADENTON, FL 34209
TITLE	PD
NAME	CHRISTOPHER, ROBERT E
STREET ADDRESS	3932 RIVERVIEW BLVD W
CITY-ST-ZIP	BRADENTON, FL 34209
TITLE	VSD
NAME	LEONARD, EDWARD J.
STREET ADDRESS	7819 18TH AVE. N.W.
CITY-ST-ZIP	BRADENTON, FL 34209
TITLE	VD
NAME	BRISTOW, LISA K
STREET ADDRESS	6908 7TH AVE BLVD NW
CITY-ST-ZIP	BRADENTON, FL 34209
TITLE	VD
NAME	STANELL, ROBERT E
STREET ADDRESS	~~415 51 STREET NW~~ 2211 6TH ST W
CITY-ST-ZIP	~~BRADENTON, FL 34209~~ PALMETTO, FL 34221
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Robert E Stanell VP 4/7/04 941-748-1040
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #