

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94454

FILED
Apr 29, 2004
Secretary of State

Entity Name: JAMES W. SEARS, P.A.

Current Principal Place of Business:

511 NORTH FERN CREEK AVE
ORLANDO, FL 32803

New Principal Place of Business:

3751 MAGUIRE BLVD, SUITE 104
ORLANDO, FL 32803

Current Mailing Address:

511 NORTH FERN CREEK AVE
ORLANDO, FL 32803

New Mailing Address:

3751 MAGUIRE BLVD, SUITE 104
ORLANDO, FL 32803

FEI Number: 59-2214361

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEARS, JAMES W
511 NORTH FERN CREEK AVE
ORLANDO, FL 32803

Name and Address of New Registered Agent:

SEARS, JAMES W
3751 MAGUIRE BLVD, SUITE 104
ORLANDO, FL 32803

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

04/29/2004

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVS () Delete
Name: SEARS, JAMES W,
Address: 511 NORTH FERN CREEK AVE
City-St-Zip: ORLANDO, FL 00000,

Title: TD () Delete
Name: SEARS, JAMES W,
Address: 511 NORTH FERN CREEK AVE
City-St-Zip: ORLANDO, FL 00000,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVS (X) Change () Addition
Name: SEARS, JAMES W
Address: 3751 MAGUIRE BLVD, SUITE 104
City-St-Zip: ORLANDO, FL 32803

Title: TD (X) Change () Addition
Name: SEARS, JAMES W
Address: 3751 MAGUIRE BLVD, SUITE 104
City-St-Zip: ORLANDO, FL 32803

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: JAMES W. SEARS

Electronic Signature of Signing Officer or Director

P

04/29/2004

Date