2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # K31998

1. Entity Name

JOHNSTON, HARRIS, GERDE & JELKS, P.A.



Principal Place of Business

% JERRY W. GERDE 239 E. FOURTH ST PANAMA CITY, FL 32401 Mailing Address

% JERRY W. GERDE 239 E. FOURTH ST PANAMA CITY, FL 32401

FILED

04 JAN 26 AM 9:50 -

SECRETARY OF STATE FALLAMASSEE, FLORIDA



01162004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-2904837 Applied For Not Applicable

5. Certificate of Status Desired.

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GERDE, JERRY W.

DO	NOT	WRITE
IN	THIS	SPACE

PANAMA CITY, FL 32401			IN THIS SPACE			
8. The above the obligati	named entity submits this statement for the poons of registered agent.	ourpose of changing its registere	ed office or re	egistered agent, or both, ii	n the State of Florida. I am famil	iar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title	l'applicable. (NOTE: Registered	Agent signature	required when reinstating)	DATE	
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.	icing	\$5.00 May Be Added to Fees		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND DIRECT PD GERDE, JERRY W. 239 E. FOURTH ST PANAMA CITY, FL VSTD JELKS, ALLEN N., JR. 239 EAST FOURTH STREET PANAMA CITY, FL	CTORS		00 01/26/	002762921 0401097021	OO *150.00
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME					NOT WRITE HIS SPACE	
STREET ADDRESS						,

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 AND TYPED OR PRINTED NAME OF

NAME OF SIGNING OFFICER OR DIRECTOR

850-763-8421