## 2004 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# K77582

FILED Dec 22, 2004 Secretary of State

Entity Name: DANIELSON, CLARKE, CHARBONNEAU & PLATT, P.A.

**Current Principal Place of Business:** New Principal Place of Business: C/O DAVID A. DANIELSON C/O JOHN B. CLARKE 1800 OLD OKEECHOBEE RD #100 1800 OLD OKEECHOBEE RD #100 WEST PALM BEACH, FL 334095207 WEST PALM BEACH, FL 334095207 **Current Mailing Address:** New Mailing Address: C/O DAVID A. DANIELSON C/O JOHN B. CLARKE 1800 OLD OKEECHOBEE RD #100 1800 OLD OKEECHOBEE RD #100 WEST PALM BEACH, FL 334095207 WEST PALM BEACH, FL 334095207 FEI Number: 65-0115902 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CLARKE, JOHN B 1800 OLD OKEECHOBEE RD STE 100 WEST PALM BEACH, FL 334095207 US 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 Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change ( ) Addition DANIELSON, DAVID A., Name: Name: CLARKE, JOHN B 1800 OLD OKEECHOBEE RD STE 100 1800 OLD OKEECHOBEE RD STE 100 Address: Address: City-St-Zip: WEST PALM BEACH, FL 334095207 City-St-Zip: WEST PALM BEACH, FL 334095207 Title: Title: () Delete (X) Change ( ) Addition Name: CLARKE, JOHN B. Name: PLATT, LYLE C 1800 OLD OKEECHOBEE RD STE 100 1800 OLD OKEECHOBEE RD STE 100 Address: Address: WEST PALM BEACH, FL 334095207 WEST PALM BEACH, FL 334095207 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: () Change () Addition CHARBONNEAU, JACQUI Name: Name: 1800 OLD OKEECHOBEE RD STE 100 Address: Address: WEST PALM BEACH, FL 334095207 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition PLATT, LYLE C Name: Name: 1800 OLD OKEECHOBEE RD STE 100 Address: Address: City-St-Zip: WEST PALM BEACH, FL 334095207 City-St-Zip:

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.

Ρ SIGNATURE: JOHN B. CLARKE 12/22/2004