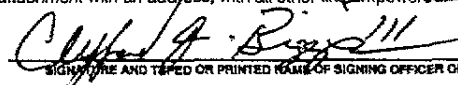


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 09, 2004 08:00 AM
Secretary of State

DOCUMENT # P00000063945		
1. Entity Name BRIGGS III, INC.		
Principal Place of Business 520 SHAMROCK BLVD. VENICE, FL 34293		Mailing Address 520 SHAMROCK BLVD. VENICE, FL 34293
DO NOT WRITE IN THIS SPACE		
5. Name and Address of Current Registered Agent WILLIAMS, ROBERT L 209 SO. NASSAU STREET, STE. 101 VENICE, FL 34285		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)		
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 NAME STREET ADDRESS CITY - ST - ZIP	P BRIGGS, CLIFFORD J 520 SHAMROCK BLVD. VENICE, FL 34293	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: 		Date _____ Daytime Phone # 941-497-0134



01212004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-1026946	Applied For ☐
5. Certificate of Status Desired ☐	Not Applicable ☐

**\$8.75 Additional
Fee Required**

U000000107514
04/09/04-80017-023 150.00

**DO NOT WRITE
IN THIS SPACE**