2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

David a. Higley

DOCUMENT # P02000132248 1. Entity Name					04 FEB 23 PM 2: 26	
DAVID A. HIGLEY, P.A.					SECRETATION OF STATE TALL ABLASSEE OF COIDA	ٔ ز
Poncipal Plac	e of Business	Masing Address				
1944 BLUFF OAK STREET 1944 BLUFF OAK ST APOPKA FL 32712 APOPKA FL 32712			REET		\$ 1827/1247 SL 287/15 (787) 287/15 287/1 28/01 18/02 NUB 118/0 18/15 18/15 (49/178) S	.
2. Principal Place of Business		3. Mailing Address				
Suite, Apt. #. etc.		Suite, Apt # etc.			MOORE CR2E034 (11/03)	,
City & State		City & State			4. FEI Number	
Zip	Country	Zip ,	Coun	dry	5. Certificate of Status Desired \$8.75 Additional Fee Required	
	6. Name and Address of Current Re	egistered Agent			7. Name and Address of New Registered Agent	
LIC	LEV DAVID A	<u></u>	 -	_Name		
HIGLEY, DAVID A 1944 BLUFF OAK STREET APOPKA FL 32712				Sireei Address (I	P.O. Box Number is Not Acceptable)	
				City	FL Zip Code	
8. The above	named entity summits this statement for	he autoose of changing its	-naistae	<u> </u>	ed agent, or both, in the State of Florida. I am familiar with, and ac	
uio congat	ions of registered agent.	we hashoos as costasting as	, cAisteit	ed once of register	ed agent, or both, in the State of Honda, I am familiar with, and ac	cept
SIGNATURE.	Signature typed or printed name of registered egent and	Title if epplicable. (NOTE	Pegistere	d Agent signatura required	when reinstancy) DATE	<u>-</u>
	ILE NOWILL FEE IS \$150,00				A Shekar Compaler Source	
After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State				_	9. Election Campaign Financing \$5.00 May Trust Fund Contribution. Added to Fee	
10.	OFFICERS AND D		11.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
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STREET ADDRESS	}					idition
	11844 DEGET OMN SINCEI		HAME	- 1		idition
CITY ST-ZIP	APOPKA FL 32712		STRE	E FT ADDRESS - S1 - 73P		idition
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HAVE		☐ Delen-	STRE CITY-	FT ADDRESS -S1-72P		
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