

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000064034

FILED
Sep 22, 2004
Secretary of State

Entity Name: GERALD ALAN SINGLETON

Current Principal Place of Business:

2932 NE 16 TERRACE
GAINESVILLE, FL 32609

New Principal Place of Business:

Current Mailing Address:

2932 NE 16 TERRACE
GAINESVILLE, FL 32609

New Mailing Address:

FEI Number: 59-3461253

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SINGLETON, GERALD A
2932 NE 16 TERRACE
GAINESVILLE, FL 32609

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SINGLETON, GERALD A.
Address: 2932 NE 16TH TERR.
City-St-Zip: GAINESVILLE, FL 32609

Title: O () Delete
Name: SINGLETON, ORISKA G
Address: 1615 NE 192ND AVE.
City-St-Zip: GAINESVILLE, FL 32609

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: O () Change (X) Addition
Name: SINGLETON, VERNON D
Address: 172 SE COMET CT
City-St-Zip: LAKE CITY, FL 32024

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: ORISKA G. SINGLETON

O

09/22/2004

Electronic Signature of Signing Officer or Director

Date