2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000076541

Entity Name: BASHAM & LUCAS DESIGN GROUP, INC.

FILED Jan 06, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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8850 GOODBY'S EXEC. DR. 7645 GATE PARKWAY SUITE A SUITE 201

JACKSONVILLE, FL 32217 JACKSONVILLE, FL 32256

Current Mailing Address: New Mailing Address:

8850 GOODBY'S EXEC. DR 7645 GATE PARKWAY SUITE A SUITE 201

JACKSONVILLE, FL 32217 JACKSONVILLE, FL 32256

FEI Number: 59-3532257 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:

MORGAN, ROBERT M ESQ. C/O FORD, JETER, BOWLUS & DUSS, P.A. 10110 SAN JOSE BLVD. JACKSONVILLE, FL 32257 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD () Delete Title: () Change () Addition

 Name:
 BASHAM, PAUL M
 Name:

 Address:
 2681 CLAIRE LN
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32223
 City-St-Zip:

Title: VSD () Delete Title: VSD (X) Change () Addition

Name: LUCAS, MICHAEL T Name: LUCAS, MICHAEL T

Address: 12809 W CAMELLIA BAY DR Address: 7645 GATE PARKWAY SUITE 201
City-St-Zip: JACKSONVILLE, FL 32223 City-St-Zip: JACKSONVILLE, FL 32256

 $\label{eq:title:V} \mbox{Title:} \qquad \mbox{V} \qquad \mbox{() Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{V} \qquad \mbox{(X) Change () Addition}$

Name: COMMINS, JAMES C Name: COMMINS, JAMES C

Address: 8850 GOODY'S EXEC. DR. Address: 7645 GATE PARKWAY SUITE 201
City-St-Zip: JACKSONVILLE, FL 32217
City-St-Zip: JACKSONVILLE, FL 32256

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: PAUL M. BASHAM PTD 01/06/2004