

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000107122

Entity Name: J. DAVID SUMMERS, P.A.

FILED
Apr 02, 2004
Secretary of State

Current Principal Place of Business:

5419 BURNT HICKORY DR
VALRICO, FL 33594

New Principal Place of Business:

2020 W BRANDON BLVD
SUITE 105
BRANDON, FL 33511

Current Mailing Address:

5419 BURNT HICKORY DR
VALRICO, FL 33594

New Mailing Address:

FEI Number: 56-2400442

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LASMAN, JEFFREY M ESQ
LASMAN & ASSOCIATES, P.A.
115 PROVIDENCE RD
BRANDON, FL 33511 US

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: SUMMERS, J. DAVID
Address: 2020 W BRANDON BLVD
City-St-Zip: BRANDON, FL 33511

Title: D () Delete
Name: SUMMERS, MARK
Address: 2020 W BRANDON BLVD
City-St-Zip: BRANDON, FL 33511

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: () Change () Addition
Name:
Address:
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.

SIGNATURE: MARK SUMMERS

D

04/02/2004

Electronic Signature of Signing Officer or Director

_____ Date