

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 125615

FILED
Jan 05, 2004
Secretary of State

Entity Name: NELSON & COMPANY INCORPORATED

Current Principal Place of Business:

110 E BROADWAY
OVIEDO, FL 32765 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 620789
OVIEDO, FL 327620789 US

New Mailing Address:

FEI Number: 59-0374460

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRUCE, MIRIAM W.
110 E. BROADWAY
OVIEDO, FL 32765 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: P () Delete
Name: EVANS, ARTHUR F,
Address: 146 EAST BROADWAY
City-St-Zip: OVIEDO, FL 00000,

Title: VAS () Delete
Name: EVANS, CHARLES W.,
Address: 511 CHAPMAN ROAD
City-St-Zip: OVIEDO, FL 00000,

Title: V () Delete
Name: EVANS, DAVID L.,
Address: 6617 LAKE CHARM CIRCLE
City-St-Zip: OVIEDO, FL

Title: ST () Delete
Name: BRUCE, MIRIAM W.,
Address: 6365 LAKE CHARM CIRCLE
City-St-Zip: OVIEDO, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: EVANS, ARTHUR F,
Address: 110 EAST BROADWAY
City-St-Zip: OVIEDO, FL 32765

Title: VAS (X) Change () Addition
Name: EVANS, CHARLES W.,
Address: 110 E BROADWAY
City-St-Zip: OVIEDO, FL 32765

Title: V (X) Change () Addition
Name: EVANS, DAVID L.,
Address: 6617 LAKE CHARM CIRCLE
City-St-Zip: OVIEDO, FL 32765

Title: ST (X) Change () Addition
Name: BRUCE, MIRIAM W.,
Address: 6365 LAKE CHARM CIRCLE
City-St-Zip: OVIEDO, FL 32765

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: MIRIAM W BRUCE

VP

01/05/2004

Electronic Signature of Signing Officer or Director

Date