

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2004 8:00 am
Secretary of State

04-21-2004 90035 007 ***150.00

DOCUMENT # 331045 1. Entity Name GLENN ASSOCIATES, INC. OF FLA.					
Principal Place of Business 1942 SE 37TH COURT CIRCLE Ocala, FL 34471			Mailing Address 1942 SE 37TH COURT CIRCLE Ocala, FL 34471		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-1212370	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent BLAIR, FLOYD F 1942 SE 37TH CT. CIRCLE Ocala, FL 34471				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and block applicable (NOTE: Registered Agent signature required when not stating)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BLAIR, FLOYD F. 1942 SE 37TH COURT CIRCLE Ocala, FL 34471	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BLAIR, MICHAEL G. 345 PLYMOUTH RD WEST PALM BEACH, FL 33405	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WARFORD, SUSAN L. 2309 SE 20TH CIRCLE Ocala, FL 34471	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WARFORD, SUSAN L. 1504 MICHELL AVE TALLAHASSEE, FL. 32303 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BLAIR, SHARON M 1942 SE 37TH COURT CIR. Ocala, FL 34471	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Floyd F. Blair</u> FLOYD BLAIR SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			04/19/04 352-694-5333 Date Daytime Phone #		