2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 413874

FILED Mar 03, 2004 Secretary of State

Entity Name: CREDIT BUREAU OF FORT WALTON BEACH, INC.

Current Principal Place of Business:		New Principal Place of Business:		
P.O. BOX	TH EGLIN PARKY 2500 ILTON BEACH, F			
Current M	lailing Address	:	New Maili	ng Address:
P.O. BOX	TH EGLIN PARKY 2500 ILTON BEACH, F			
El Number	: 59-1428718	FEI Number Applied For ()	FEI Number Not App	licable () Certificate of Status Desired ()
Name and	d Address of Cu	rrent Registered Agent:	Name and	Address of New Registered Agent:
712 MOOF PANAMA	TOMMY M. RE CIRCLE CITY, FL 32401 named entity su	US bmits this statement for the	purpose of changing i	its registered office or registered agent, or bot
n the State	e of Florida.			
n the State SIGNATU	RE:			
	RE:	Signature of Registered Ag	ent	Date
BIGNATU	RE:Electronic	Signature of Registered Ag	ent	Date
BIGNATUI	RE:Electronic	Trust Fund Contribution ().		Date NS/CHANGES TO OFFICERS AND DIRECTO
Election Car DFFICER Title: lame: kddress:	RE: Electronic mpaign Financing 1	Trust Fund Contribution (). ORS: elete M, CLE		
BIGNATUI	Electronic mpaign Financing 1 S AND DIRECTO PD ()D COOLEY,TOMMY 712 MOORE CIRO	Trust Fund Contribution (). ORS: The lette M, CLE The lette D., CLE CLE	ADDITION Title: Name: Address:	NS/CHANGES TO OFFICERS AND DIRECTORY PD (X) Change () Addition COOLEY, JR. TOMMY, 151 COYOTE PASS
Election Car DFFICER Title: Jame: Address: City-St-Zip: Title: Jame: Address:	Electronic mpaign Financing 1 S AND DIRECTO PD ()D COOLEY,TOMMY 712 MOORE CIRO PANAMA CITY, FI S ()D COOLEY,OLIVIA 712 MOORE CIRO	Frust Fund Contribution (). ORS: elete M, CLE - elete D., CLE - elete J.JOANN, RIVE.	ADDITION Title: Name: Address: City-St-Zip: Title: Name: Address:	NS/CHANGES TO OFFICERS AND DIRECTOR PD (X) Change () Addition COOLEY, JR. TOMMY, 151 COYOTE PASS PANAMA CITY BEACH, FL

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: TOMMY COOLEY JR. PD 03/03/2004