


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90505 042 ***150.00

DOCUMENT # 493400 1. Entity Name DE LA PARTE & GILBERT, PROFESSIONAL ASSOCIATION					
Principal Place of Business 101 E KENNEDY BOULEVARD SUITE 3400 TAMPA, FL 33602 US			Mailing Address POST OFFICE BOX 2350 TAMPA, FL 33601 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-1637031	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
DE LA PARTE, L DAVID 101 E. KENNEDY BLVD., STE. 3400 TAMPA, FL 33602				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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	VD DE LA PARTE, EDWARD P JR 15802 DAWSON RIDGE DR TAMPA, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition de la Parte, Edward P. Jr. 15802 Dawson Ridge Drive Tampa, FL 33647		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GILBERT, RICHARD. 3317 W. GRANADA TAMPA, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Gilbert, Richard A. 3317 West Granada St. Tampa, FL 33629		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DICKEY, DAVID D 111 N MONTCLAIR AVE BRANDON, FL 33510 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Dickey, David 518 Lakewood Drive No. Brandon, FL 33510		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DE LA PARTE, LOUIS DAVID 3019 VILLA ROSA PARK TAMPA, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <input type="checkbox"/> Change <input type="checkbox"/> Addition de la Parte, Louis David 3019 Villa Rosa Park Tampa, FL 33611		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MCMAMARA, PATRICK J 5803 GORDON AVE TAMPA, FL 33611 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition McNamara, Patrick J. 5803 Gordan Ave. Tampa, FL 33611		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CALDEVILLA, DAVID N 9734 N ARZENIA AVE TAMPA, FL 33612 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Caldevilla, David M. 9734 N. Armenia Ave. Tampa, FL 33612		
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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			4/21/04 813 229 2725 <small>Date Daytime Phone #</small>		

Attachment

44036783

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DE LA PARTE & GILBERT, PROFESSIONAL ASSOCIATION

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (continued)

TITLE	VD
NAME	Ronald A. Christaldi
STREET ADDRESS	2914 San Nicholas Street
CITY-ST-ZIP	Tampa, FL 33629