
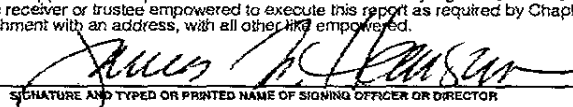


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 22, 2004 08:00 AM
Secretary of State

DOCUMENT # 547690		
1. Entity Name JAMES N. HANSEN, DESIGNER, INC.		
Principal Place of Business 465 MAITLAND AVE. ALTAMONTE SPRINGS, FL 32701		Mailing Address 465 MAITLAND AVE. ALTAMONTE SPRINGS, FL 32701
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent HANSEN, JAMES N. 1008 HOWELL BRANCH RD WINTER PARK, FL 32789		DO NOT WRITE IN THIS SPACE
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)</small>		
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		DO NOT WRITE IN THIS SPACE
TITLE	P	
NAME	HANSEN, JAMES N.	
STREET ADDRESS	1008 HOWELL BRANCH RD	
CITY-ST-ZIP	WINTER PARK, FL	
TITLE	S	
NAME	HANSEN, CAROLYN T.	
STREET ADDRESS	1008 HOWELL BRANCH RD	
CITY-ST-ZIP	WINTER PARK, FL	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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: 		Date: 4-20-04 Daytime Phone #: 407-644-1004