2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 601869

Entity Name: SIMMONS AND HART, P.A.

FILED Apr 14, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

125 NE 1ST AVE

SUITE 1

OCALA, FL 344706675 US

Current Mailing Address: New Mailing Address:

125 NE 1ST AVE SUITE 1

OCALA, FL 344706675 US

FEI Number: 59-1309659 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ACKERMAN, BYRCE 125 N.E. 1ST AVE. SUITE 1 OCALA, FL 34470 US

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DST () Delete

Name: HAINES, TIM D.,

Address: 125 NE 1ST AVE STE 1

City-St-Zip: OCALA, FL

Title: VD () Delete

Name: GRAY, STEVEN H,

Address: 125 NE 1ST AVE STE 1

City-St-Zip: OCALA, FL

Title: DP () Delete Name: ACKERMAN, BRYCE

Address: 125 NE FIRST AVENUE, SUITE 1

City-St-Zip: OCALA, FL 34470

Title: DST (X) Change () Addition

Name: HAINES, TIM D

Address: 125 NE 1ST AVE STE 1

City-St-Zip: OCALA, FL 34470

Title: VD (X) Change () Addition

Name: GRAY, STEVEN H
Address: 125 NE 1ST AVE STE 1
City-St-Zip: OCALA, FL 34470

Title: DP (X) Change () Addition

Name: ACKERMAN, BRYCE W

Address: 125 NE FIRST AVENUE, SUITE 1

City-St-Zip: OCALA, FL 34470

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: BRYCE W. ACKERMAN PRES 04/14/2004