2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004
Secretary of State

DOCUMENT# 601872

Entity Name: MAGUIRE, VOORHIS, & WELLS, P.A.

Current Principal Place of Business:

200 S. ORANGE AVE.
SUITE 2600
ORLANDO, FL 32801 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1526
ORLANDO, FL 32802 US

New Mailing Address:

FEI Number: 59-1352643 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILSON, WILLIAM B
200 S. ORANGE AVE.
SUITE 2600
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

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:

Title:	VPD	( ) Delete
Name:	WILSON, WILLIAM B	
Address:	200 S. ORANGE AVE STE 2600	
City-St-Zip:	ORLANDO, FL 32801	
Title:	SD	( ) Delete
Name:	YATES, LEIGHTON D	
Address:	200 SO. ORANGE AVE. STE. 2600	
City-St-Zip:	ORLANDO, FL 32801	
Title:	DP	( ) Delete
Name:	MELTON, HOWELL W	
Address:	200 S. ORANGE AVE., SUITE 2600	
City-St-Zip:	ORLANDO, FL 32801	
Title:	DT	( ) Delete
Name:	ALBRITTON, HERBERT L JR	
Address:	1916 HARDEN BLVD	
City-St-Zip:	LAKELAND, FL 338031829	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: WILLIAM WILSON VP 04/30/2004

Electronic Signature of Signing Officer or Director Date