2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004 08:00 AM
Secretary of State

DOCUMENT # 602712

1. Entity Name
DRS. ORR, BRAUKMAN & RAUCHWAY, P.A.

Principal Place of Business	Mailing Address
800 2ND AVE SOUTH STE 210 SAINT PETERSBURG, FL 33701 US	800 2ND AVE SOUTH STE 210 SAINT PETERSBURG, FL 33701 US

DO NOT WRITE IN THIS SPACE

04222004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-1316491

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

RAUCHWAY, MICHAEL
1201 5TH AVE N.
STE 202
ST. PETERSBURG BEACH, FL 33705

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	SD
NAME	RAUCHWAY, MICHAEL
STREET ADDRESS	3216 CEL CENTRE
CITY-ST-ZIP	ST PETERSBURG, FL
TITLE	PD
NAME	NUNNELLY, DAVID
STREET ADDRESS	5963 BAYVIEW CIR SO
CITY-ST-ZIP	ST PETERSBURG, FL
TITLE	VD
NAME	LARSEN, CHRISTINE
STREET ADDRESS	800 2ND AVE SOUTH
CITY-ST-ZIP	SAINT PETERSBURG, FL 33701
TITLE	TD
NAME	EGAN, THOS.
STREET ADDRESS	2250 MERMAID PT. NE
CITY-ST-ZIP	ST. PETERSBURG, FL
TITLE	VD
NAME	SCHIRM, STEVEN
STREET ADDRESS	791 SUWANNEE CT. NE
CITY-ST-ZIP	ST PETERSBURG, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/29/04-80191-025 150.00

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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: Dan E Nunnelly Jr 4/28/04 (727) 896-3134 x6
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #