

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 602763

FILED
Jul 02, 2004
Secretary of State

Entity Name: STEVE POULOS, P.A.

Current Principal Place of Business:

804 16TH STREET
ST. AUGUSTINE, FL 32084

New Principal Place of Business:

250 SR 207
ST. AUGUSTINE, FL 32084

Current Mailing Address:

804 16TH STREET
ST. AUGUSTINE, FL 32084

New Mailing Address:

25 OAK RD.
ST. AUGUSTINE, FL 32080

FEI Number: 59-1318898

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POULOS,STEVE
804 16TH STREET
ST. AUGUSTINE, FL 32084 US

Name and Address of New Registered Agent:

POULOS,STEVE
25 OAK RD.
ST. AUGUSTINE, FL 32080 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

07/02/2004

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: POULOS,STEVE,
Address: 804 16TH STREET
City-St-Zip: ST. AUGUSTINE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: POULOS,STEVE,
Address: 25 OAK RD.
City-St-Zip: ST. AUGUSTINE, FL 32080

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: STEVE POULOS, DDS

Electronic Signature of Signing Officer or Director

PD

07/02/2004

Date