2004 FOR PROFIT CORPORATION ANNUAL REPORT

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

DOCUMENT # 608229 1. Entity Name NOBLITT & WOHLGEMUTH, INC.				Secretary of State		
3720 5TH A	ce of Business AVE N. BURG, FL 33713	Mailing Address 3720 5TH AVE N. ST PETERSBURG, FL 33713				
DO NOT WRITE IN THIS SPACE			04262004 No Chg-P CR2E034 (10/03) 4. FEI Number			
WOHLGEMUTH, NANCY 3720 5TH AVE4 N. ST PETERSBURG, FL 33713			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 Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when releastating)						
After M	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.0			.00 May Be led to Fees		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND D VP NOBLITT, HENRY L 3720 5TH AVE N. ST PETERSBURG, FL	RECTORS				
NAME STREET ADDRESS CITY-ST-ZIP	P WOHLGEMUTH, NANCY 3720 5TH AVE N. ST PETERSBURG FL,				U00000141010 04/29/04-80186-008 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	-		<u> </u>	IN T	THIS SPACE	
TITLE NAME STREET ADDRESS CHY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	4	- 				
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.						