## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 611572** 

FILED May 03, 2004 Secretary of State

Entity Name: JAY S. REESE, M.D. - TEMPLE TERRACE PROFESSIONALAL ASSOCIATION

Current Principal Place of Business: New Principal Place of Business:

10320 N 56TH ST

TEMPLE TERRACE, FL 33617

Current Mailing Address: New Mailing Address:

10320 N 56TH ST

TEMPLE TERRACE, FL 33617

FEI Number: 59-1923768 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:

REESE, JAY S 10320 N 56TH ST, SUITE 100

TEMPLE TERRACE, FL 33617

REESE, JAY S 27231 EDENFIELD DRIVE WESLEY CHAPEL, FL 33543 77

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: 05/03/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition

Name: REESE, JAY S, Name: REESE, JAY S

 Address:
 10320 N 56TH ST
 Address:
 27231 EDENFIELD DRIVE

 City-St-Zip:
 TEMPLE TERR, FL
 00000, 33617
 City-St-Zip:
 WESLEY CHAPEL, FL
 33543 US

Title: PST () Delete Title: PST (X) Change () Addition Name: REESE, JAY S, Name: REESE, JAY S,

Address: 10320 N 56TH Address: 27231 EDENFIELD DRIVE
City-St-Zip: TEMPLE TERR, FL 00000, 33617 City-St-Zip: WESLEY CHAPEL, FL 33543 US

Title: V ( ) Delete Title: V (X) Change ( ) Addition

 Name:
 REESE, ANN E.
 Name:
 REESE, ANN E.

 Address:
 4818 LONDONDERRY DR
 Address:
 27231 EDENFIELD DRIVE

 City-St-Zip:
 TAMPA, FL 33647
 City-St-Zip:
 WESLEY CHAPEL, FL 33543 US

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: JAY S. REESE, M. D. PRES 05/03/2004