


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2004 8:00 am
Secretary of State

04-05-2004 90053 006 ***150.00

DOCUMENT # 619790
 1. Entity Name
BERNARD F. GRALL, JR., P.A.



Principal Place of Business Mailing Address
 7555 20TH ST P O BOX 690218
 VERO BEACH, FL 32966 US VERO BEACH, FL 32969-0218 US

94043095

DO NOT WRITE IN THIS SPACE

01272004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1902148	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 GRALL, BERNARD F.
 7555 20TH ST.
 VERO BEACH, FL 32966

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.

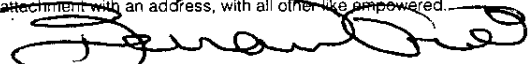
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GRALL, BERNARD F JR 7575 20TH STREET VERO BEACH, FL 00000,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GRALL, MARGARET 7575 20TH STREET VERO BEACH, FL 00000,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FANARO, RONALD S. 7555 20TH STREET VERO BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	XXXXXXXXXXXX XXXXXXXXXXXX XXXXXXXXXXXX
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ERIN K. GRALL 7555 20TH STREET VERO BEACH, FL 32966
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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:  **3-30-04** (772) 569-0000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
BERNARD F. GRALL, JR.