


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 03, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 668473</b> 1. Entity Name VISUALGRAPHICS DESIGN, INC.	
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Principal Place of Business 1111 N WESTSHORE BLVD STE 201A TAMPA, FL 33607 US	Mailing Address 1111 N WESTSHORE BLVD STE 201A TAMPA, FL 33607 US
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**DO NOT WRITE IN THIS SPACE**

01052004 No Chg-P CR2E034 (10/03)

4. FEI Number  
59-2081352

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

KING, WILLIAM S. JR. 1111 N WESTSHORE BLVD STE 201A TAMPA, FL 33607
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**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 resigning)

DATE \_\_\_\_\_

**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 NAME STREET ADDRESS CITY-ST-ZIP	DP KING, WILLIAM S., JR. 1111 N WESTSHORE BLVD, STE 201A TAMPA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KRUEGER, DEBBIE R 1111 N WESTSHORE BLVD SUITE 201A TAMPA, FL 33607
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SLOTHOWER, TRUMAN H III 1111 N WESTSHORE BLVD SUITE 201A TAMPA, FL 33607
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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)(b), 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: \_\_\_\_\_

WILLIAM S. KING, JR. 4/30/2004 289-9308

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #