

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 674668

FILED
Apr 22, 2004
Secretary of State

Entity Name: MOSES AND ASSOCIATES, INC.

Current Principal Place of Business:

2209 NW 40TH TERR
STE A
GAINESVILLE, FL 32605

New Principal Place of Business:

Current Mailing Address:

2209 NW 40TH TERR
STE A
GAINESVILLE, FL 32605

New Mailing Address:

FEI Number: 59-2006400 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOSES, FRANCIS W
2209 NW 40TH TERR
SUITE A
GAINESVILLE, FL 32605 US

Name and Address of New Registered Agent:

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

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: LEBO, GEORGE R
Address: 1504 NW 11TH RD
City-St-Zip: GAINESVILLE, FL 32605

Title: P () Delete
Name: MOSES, FRANCIS W,
Address: 1523 N W 52ND TERR
City-St-Zip: GAINESVILLE, FL 32605

Title: ST () Delete
Name: WEST, ANDREW C
Address: 1518 NW 4TH AVE, APT B
City-St-Zip: GAINESVILLE, FL 32603

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: AKIN, MARK R
Address: 2155 NW 88TH STREET
City-St-Zip: GAINESVILLE, FL 32606 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: FRANCIS W MOSES

P

04/22/2004

Electronic Signature of Signing Officer or Director

_____ Date