2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 678187

City-St-Zip:

TAMPA, FL 33634

FILED Apr 05, 2004 Secretary of State

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Entity Na	me: JOHNNY	P. SIMS INC.			
-					
Current Principal Place of Business:			New Principal Place of Business:		
6911 CON TAMPA, F	ATY RD. L 336344417				
Current Mailing Address:			New Mailing Address:		
6911 CON TAMPA, F	ATY RD. L 336344417				
FEI Number	: 59-1911974	FEI Number Applied For()	FEI Number Not App	licable ()	Certificate of Status Desired ()
Name and	Address of C	urrent Registered Agent:	Name and Address of New Registered Agent:		
TAMPA, F	RMENIA AVE L 33612 US		urpose of changing i	ts registere	d office or registered agent, or both,
	e of Florida.	submittee time etatement for the p	arpooc or changing i	to regiotore	a omes of registered agent, or bear,
SIGNATU	RE:				
	Electron	ic Signature of Registered Age	nt		Date
Election Car	mpaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	PD () SIMS, JOHNNY 9728 N ARMEN TAMPA, FL 330	IIA AVE	Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	VP () SIMS, LEIGH M 7430 OAKVIST, TAMPA, FL 330	A CIR	Title: Name: Address: City-St-Zip:	VP SIMS, LEIG 3607 E. TAN TAMPA, FL	MPA CIRCLE
Title: Name: Address: City-St-Zip:	S () SIMS, SCOTT F 7430 OAKVIST, TAMPA, FL 330	A CIRCLE	Title: Name: Address: City-St-Zip:	S SIMS, SCO 6211 OAKC TAMPA, FL	LUSTER
Title: Name: Address:	T () SIMS, ERIC P 7430 OAKVIST	Delete	Title: Name: Address:	T SIMS, ERIC 16208 LETA	(X) Change()Addition P A TRACE CT.

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.

City-St-Zip:

TAMPA, FL 33624

SIGNATURE: LEIGH SIMS VP 04/05/2004