2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 22, 2004 08:00 AM Secretary of State

DOCUMENT # 689680 1. Entity Name CALHOUN & DONNELLY, P.A.			Secretary of State				
Principal Plac	ce of Business N	failing Address	<u> </u>	1			
2210 SE 17		2210 SE 17TH ST.	E .	,			
#302 OCALA, FL :		#302 OCALA, FL 34471-9145					
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, ,-1 ., i(i)				59-202			Not Applicable
S. 31 1 1 1				5. Certificate	of Status Desired		75 Additional Required
 -	6. Name and Address of Current Regis	stered Agent	3 5 1 4 200 5 5 12 699 13 57 6 7	्राहरू अस्त्रहरू के क्या	- raintimus att Leiner		
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COOPER, MICHAEL J 321 NW 3RD AVE				DO	MOL M	RITE	
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	e named entity submits this statement for the tions of registered agent.	purpose of changing its register	ed office or register	red agent, or bo	th, in the State of Flo	rida. I am familia	ar with, and accept
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SIGNATURE.	Signature, typed or printed name of conjectored agent and tide	Muspicable (NOTE Asystem	d Agam signar, reinschlich	whon rainstaling)		CATE	<u> </u>
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Final Trust Fund Contribution.				.00 May Be ed to Fees	U00000 04/23/04-)125744 -80004-01	5 150.00
10.	OFFICERS AND DIRE	CIORS				rpart.Dir	COST FINANCE
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12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(2)(.) 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 inade 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:

STREET ADDRESS CITY-ST-ZIP

