# **2004 FOR PROFIT CORPORATION**

### **ANNUAL REPORT DOCUMENT # 698582** 1. Entity Name TIMOTHY F. PRUGH, P.A. Principal Place of Business Mailing Address 1009 WEST PLATT STREET 1009 WEST PLATT STREET TAMPA, FL 33606 TAMPA, FL 33606



02-25-2004 90030 024 \*\*\*150.00



### DO NOT WRITE IN THIS SPACE

01312004 No Chg-P CR2E034 (10/03)

Applied For 4. FEI Number 59-2113560 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required

2/19/04

Daytime Phone #

Timothy F. Prugh

6. Name and Address of Current Registered Agent

PRUGH, TIMOTHY F. 1009 WEST PLATT STREET TAMPA, FL 33606

changed, or on an attachment with a

SIGNATURE:

## 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 reinstating) DATE				
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00  9. Election Campaign Finar Trust Fund Contribution.		cing \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST PRUGH, TIMOTHY F., ESQ. 1009 W PLATT ST TAMPA, FL			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PRUGH, TIMOTHY F., ESQ. 1009 W PLATT ST TAMPA, FL			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1			
12. I hereby certify that the information supplied with this filling 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 supplier profile 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 grustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if				