


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2004 8:00 am
Secretary of State

04-13-2004 90014 033 ***150.00

DOCUMENT # F00000001821					
1. Entity Name ORLANDO BUSINESS PARK CD, INC.					
Principal Place of Business 17140 BERNARDO CENTER DRIVE, SUITE 300 SAN DIEGO, CA 92128			Mailing Address 17140 BERNARDO CENTER DRIVE, SUITE 300 SAN DIEGO, CA 92128		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 33-0882729	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CORPAMERICA, INC. 1201 HAYS STREET TALLAHASSEE, FL 32301			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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: _____ (NOTE: Registered Agent signature required when reinstating)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTCO ALLEN, GEORGE W 11300 NORTH CENTRAL EXPRESSWAY, SUITE 407 DALLAS, TX 75243		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D + CFO Milton Schaeffer 11300 N. Central Expressway, Ste 407 Dallas, TX 75243	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD OTTESEN, S. ERIC 17140 BERNARDO CENTER DRIVE, SUITE 300 SAN DIEGO, CA 92128		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD OTTESEN, S. ERIC 17140 BERNARDO CENTER DRIVE, SUITE 300 SAN DIEGO, CA 92128		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILSON, SUSAN B 17140 BERNARDO CENTER DRIVE, SUITE 300 SAN DIEGO, CA 92128		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D + VP Susan Wilson 17140 Bernardo Ctr. Dr. # 300 San Diego, CA 92128	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>	
12. I hereby certify that the information supplied with this filing 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 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: _____			4/5/04 858-675-9400		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Susan Wilson, Vice President			Date Daytime Phone #		