## **2004 FOR PROFIT CORPORATION ANNUAL REPORT**

## Jul 12, 2004 08:00 AM **Secretary of State** DOCUMENT # F03000006223 1. Entity Name GRANT CONSULTING ASSOCIATES, INC. Principal Place of Business Mailing Address 1090 SOUTH COLLIER BLVD APT 314 1090 SOUTH COLLIER BLVD APT 314 MARCO ISLAND, FL 34145-6446 MARCO ISLAND, FL 34145-6446 07072004 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 36-4307893 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GRANT, JOSEPH DO NOT WRITE 1090 SOUTH COLLIER BLVD APT 314 MARCO ISLAND, FL 34145-6446 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 de il applicable \$5.00 May Be FILE NOW!!! FEE IS \$150,00 9. Election Campaign Financing In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Trust Fund Contribution. Added to Fees Due by September 8, 2004 OFFICERS AND DIRECTORS 10. PCD STLE NAME GRANT, JOSEPH 1090 SOUTH COLLIER BLVD APT 314 STREET ADDRESS 100000165412 CRY-ST-ZIP MARCO ISLAND, FL 341456446 07/12/04-80013-006 150.00 TITLE MANSE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-78P IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP

12. Thereby certify that the information supplied with this filting does not quality for the exemption stated in Section 119.07(3%). Florida Statutes, I further certify that the information indicated on this report or suppliemental 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 charged, or on an attachment with an address, with all other like empowered.

SIGNATURE:

TITLE NAME STREET ADDRESS CETY-ST-ZIP TITLE NAME STREET ADDRESS

**FILED**