

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 05, 2004 08:00 AM
Secretary of State

DOCUMENT # F76482

1. Entity Name

BARBARA BALL & ASSOCIATES, INC.



Principal Place of Business

C/O WIELAND, JEFFREY, P
255 SOUTH ORANGE AVE., STE 1700
ORLANDO FL 32801-3483
US

Mailing Address

10 DALEGARTH AVE
BOLTON, ENGLAND BL1-5-W

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 **59-2190700**

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WIELAND, JEFFREY P
255 SOUTH ORANGE AVE
STE 1700
ORLANDO FL 32801

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

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

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VD
CANNON, JAMES M
499 SR 434 STE 2015
ALTAMONTE SPGS FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PTD
BALL, GRAHAM
FAIRHOLME DALGARATH AVE
BOLTON, U K 00000 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
V
BALL, NIGEL S
FAIRHOLME DALGARATH AVE
BOLTON, U K 00000 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VD
SANJURJO, RALPH E
4041 ROSE PETAL LANE
ORLANDO, FL 00000 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VSD
BALL, BARBARA
FAIRHOLME DALGARATH AVE
ORLANDO, FL 00000 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition
U00000076563
03/05/04-80006-024 150.00

TITLE
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/27/04 President