

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000000983

FILED
Apr 27, 2004
Secretary of State

Entity Name: THE ANDERSEN FIRM, A PROFESSIONAL CORPORATION

Current Principal Place of Business:

THE KENNEDY CENTER
1010 KENNEDY DRIVE, SUITE 201
KEY WEST, FL 330404019

New Principal Place of Business:

Current Mailing Address:

THE KENNEDY CENTER
1010 KENNEDY DRIVE, SUITE 201
KEY WEST, FL 330404019

New Mailing Address:

FEI Number: 62-1551879

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSEN, WILLIAM E
THE ANDERSEN FIRM, A PROFESSIONAL CORP.
501 WHITEHEAD STREET
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

ANDERSEN, WILLIAM E
THE ANDERSEN FIRM, A PROFESSIONAL CORP.
1010 KENNEDY DRIVE, SUITE 201
KEY WEST, FL 33040 US

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.

SIGNATURE: WILLIAM E ANDERSEN

04/27/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCD () Delete
Name: ANDERSEN, WILLIAM E
Address: 6TH FL, 415 BROAD STREET
City-St-Zip: KINGSPORT, TN 37660

Title: SD (X) Delete
Name: BISKNER, KENNETH J JR.
Address: 6TH FL, 415 BROAD STREET
City-St-Zip: KINGSPORT, TN 37660

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM E ANDERSEN

PD

04/27/2004

Electronic Signature of Signing Officer or Director

Date