


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 12, 2004 8:00 am**  
**Secretary of State**

01-12-2004 90020 012 \*\*\*150.00

<b>DOCUMENT # G66531</b>																																																																																																																																																											
<b>1. Entity Name</b> MOSS, HENDERSON, BLANTON, LANIER, KRETSCHMER & MURPHY, P.A.																																																																																																																																																											
<b>Principal Place of Business</b> % GEORGE H. MOSS, II 817 BEACHLAND BLVD. VERO BEACH, FL 32963			<b>Mailing Address</b> % GEORGE H. MOSS, II 817 BEACHLAND BLVD. VERO BEACH, FL 32963																																																																																																																																																								
<b>2. Principal Place of Business</b> C/O STEVE L. HENDERSON Suite, Apt. #, etc. 817 Beachland Blvd City & State Vero Beach, FL Zip 32963 Country USA		<b>3. Mailing Address</b> C/O STEVE L. HENDERSON Suite, Apt. #, etc. 817 Beachland Blvd City & State Vero Beach, FL Zip 32963 Country USA																																																																																																																																																									
<b>4. FEI Number</b> 59-2334195		Applied For <input type="checkbox"/> Not Applicable																																																																																																																																																									
<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>																																																																																																																																																											
<b>6. Name and Address of Current Registered Agent</b> MOSS, GEORGE H., II 817 BEACHLAND BLVD. VERO BCH., FL 32963			<b>7. Name and Address of New Registered Agent</b> Name <u>STEVE L. HENDERSON</u> Street Address (P.O. Box Number is Not Acceptable) <u>817 BEACHLAND BLVD</u> City <u>Vero Beach</u> FL Zip Code <u>32963</u>																																																																																																																																																								
<b>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.</b> SIGNATURE: <u>[Signature]</u> (NOTE: Registered Agent signature required when reinstating) DATE: _____																																																																																																																																																											
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>		<b>9. Election Campaign Financing</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>																																																																																																																																																									
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left; padding: 5px;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left; padding: 5px;">11. 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<b>12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.</b>																																																																																																																																																											
SIGNATURE: <u>[Signature]</u> <span style="float: right;">Date <u>1/8/04</u> Daytime Phone # _____</span> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																																																																																																																																																											