2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # H16760

1. Entity Name

TOMLINSON PETERSON ASSOCIATES, INC. ARCHITECTURAL/ENGINEERING CONSULTANTS



FILED Mar 23, 2004 08:00 AM Secretary of State

Principal Place of Business 1958-B COMMONWEALTH DR. TALLAHASSEE, FL 32303 Mailing Address

1958-B COMMONWEALTH DR. TALLAHASSEE, FL 32303 US



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03222004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-2470435 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TOMLINSON, JOHN C. 892 MADERIA CIRCLE TALLAHASSEE, FL 32312

SIGNATURE:

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				200 10 200	7.4	
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 Fiorida. I am familiar with, and accept the obligations of registered agent						
SIGNATURE			*	i i i i i i i i i i i i i i i i i i i	and the second s	19 Jan 201
	Signature, typed or printed name of registered agent and title	fapplicable. (NOTE, Re	egistered Agent signature	required when reinstating)	DATE	
FILE NOTH FEE 10 8 130.00		9. Election Campaign Trust Fund Contribu	~ _	\$5.00 May Be Added to Fees	(100000094563 03/23/04-80001-010	158.75
10.	OFFICERS AND DIREC	TORS .				
NAME STREET ADDRESS CITY-ST-ZIP	C TOMLINSON, JOHN C 892 MADERIA CIRCLE TALLAHASSEE, FL 32312				-	
TITLE NAME STREET ADDRESS CITY-SI-ZIP	P PETERSON, J. TERRY 1657 YEARLING TRAIL TALLAHASSEE, FL 32311					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	i
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SPACE	
NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
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 ampowered.						