

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H39675

Entity Name: JAMES DORIS, INC.

FILED
Feb 01, 2004
Secretary of State

Current Principal Place of Business:

3920 - 31ST STREET NORTH
ST. PETERSBURG, FL 33714

New Principal Place of Business:

Current Mailing Address:

3920 - 31ST STREET NORTH
ST. PETERSBURG, FL 33714

New Mailing Address:

FEI Number: 59-2509856

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONK, JAMES L.
3920 - 31ST STREET NORTH
ST. PETERSBURG, FL 33714

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MONK, JAMES L.,
Address: 6472 - 30TH AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL

Title: VD () Delete
Name: MONK, DORIS L.,
Address: 6472 - 30TH AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL

Title: TD () Delete
Name: MONK, WALTER,
Address: 6472 - 30TH AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL

Title: SD () Delete
Name: MCKINNON, BARBARA,
Address: 6472 - 30TH AVNEUE NORTH
City-St-Zip: ST. PETERSBURG, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MONK, JAMES L PD
Address: 6472 - 30TH AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL 33710 US

Title: VD (X) Change () Addition
Name: MONK, DORIS L V.P.
Address: 6472 - 30TH AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL 33710 US

Title: TD (X) Change () Addition
Name: MONK, WALTER TREAS
Address: 3920 30TH AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL 33714 US

Title: SD (X) Change () Addition
Name: FINNICAL, BARBARA M SEC
Address: 6226 CLOVER LANE
City-St-Zip: MACUNGIE, PA 18026 US

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: DORIS L. MONK

VP

02/01/2004

Electronic Signature of Signing Officer or Director

_____ Date