


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

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

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| DOCUMENT # H45324 1. Entity Name LEE AND BRIDGES ARCHITECTURAL CONSULTANTS, INC. |  |
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| Principal Place of Business 105 NORTH MADISON ST QUINCY, FL 32351 | Mailing Address 105 NORTH MADISON ST QUINCY, FL 32351 |
|---|---|

DO NOT WRITE IN THIS SPACE



01122004 No Chg-P CR2E034 (10/03)

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| 4. FEI Number 59-2506357 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | \$8.75 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent BRIDGES, WILLIAM MCCLELLAN 105 NORTH MADISON ST QUINCY, FL 32351 |
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**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

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 | STD BRIDGES, WILLIAM M. 105-B N. MADISON ST. QUINCY, FL |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD LEE, RICHARD GEORGE 105-B N. MADISON ST. QUINCY, FL |
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01/23/04-80038-021 158.75

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IN THIS SPACE**

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 fees empowered.

SIGNATURE: Richard Lee 1/21/04 677-4177
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #