

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H48200

FILED
Jan 06, 2004
Secretary of State

Entity Name: LANDIS & KANE, P.A.

Current Principal Place of Business:

TWO LANDMARK CENTER
SUITE 600 225 EASE ROBINSON ST.
ORLANDO, FL 32801 US

New Principal Place of Business:

TWO LANDMARK CENTER
SUITE 600 225 EAST ROBINSON ST.
ORLANDO, FL 32801 US

Current Mailing Address:

TWO LANDMARK CENTER
SUITE 600 225 EAST ROBINSON ST.
ORLANDO, FL 32801 US

New Mailing Address:

FEI Number: 59-2506354 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANDIS, DAVID M
TWO LANDMARK CTR
STE 600, 225 E ROBINSON ST
ORLANDO, FL 32801 US

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: LANDIS, DAVID M.,
Address: STE 600 TWO LANDMARK CENTER 225 ROBINSON S
City-St-Zip: ORLANDO, FL

Title: VPSD () Delete
Name: KANE, JON E.
Address: STE 600, 2 LANDMARK CTR 225 E ROBINSON ST
City-St-Zip: ORLANDO, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LANDIS, DAVID M.,
Address: STE 600 TWO LANDMARK CENTER 225 ROBINSON S
City-St-Zip: ORLANDO, FL 32801 US

Title: VPSD (X) Change () Addition
Name: KANE, JON E.
Address: STE 600, 2 LANDMARK CTR 225 E ROBINSON ST
City-St-Zip: ORLANDO, FL 32801 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: DAVID M. LANDIS

PD

01/06/2004

Electronic Signature of Signing Officer or Director

Date