

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H51595

FILED
Mar 05, 2004
Secretary of State

Entity Name: PAUL DAVIS SYSTEMS, INC. OF BROWARD COUNTY

Current Principal Place of Business:

1775 BLOUNT RD
STE 408
POMPANO BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

1775 BLOUNT RD
STE 408
POMPANO BEACH, FL 33069

New Mailing Address:

FEI Number: 59-2496640

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NIESSEN, LAURIE A.
258 W. HEMINGWAY CIRCLE
MARGATE, FL 33063 US

Name and Address of New Registered Agent:

NIESSEN, LAURIE A.
1775 BLOUNT RD
SUITE 411
POMPANO BEACH, FL 33069 US

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:

03/05/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCDT () Delete
Name: NIESSEN, WILLIAM C.,
Address: 317 WALNUT ST.
City-St-Zip: HOLLYWOOD, FL

Title: VD () Delete
Name: NIESSEN, CHARLES
Address: 9763 MAJORCA PL
City-St-Zip: BOCA RATON, FL 33434

Title: SD () Delete
Name: NIESSEN, LAURIE A.,
Address: 258 W. HEMMINGWAY CIRCLE
City-St-Zip: MARGATE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCDT (X) Change () Addition
Name: NIESSEN, WILLIAM C
Address: 317 WALNUT ST.
City-St-Zip: HOLLYWOOD, FL

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: NIESSEN, LORRIE A A
Address: 1775 BLOUNT RD SUITE 411
City-St-Zip: POMPANO BEACH, FL 33069

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: LORRIE A NIESSEN

MS

03/05/2004

Electronic Signature of Signing Officer or Director

Date