

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2004 8:00 am
Secretary of State

04-22-2004 90041 024 ***150.00

DOCUMENT # H77953 1. Entity Name BARNETT FINANCIAL CORPORATION																											
Principal Place of Business 20 SE 14TH STREET SUITE 204 BOCA RATON, FL 33432 US		Mailing Address 20 SE 14TH STREET SUITE 204 BOCA RATON, FL 33432 US																									
2. Principal Place of Business 10 SE 13th Street Suite, Apt. #, etc. B4 City & State Boca Raton, FL Zip 33432 Country US		3. Mailing Address 10 SE 13th Street Suite, Apt. #, etc. B4 City & State Boca Raton, FL Zip 33432 Country US																									
4. FEI Number 59-2603866		Applied For <input type="checkbox"/> Not Applicable																									
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent BARNETT, WM. C. 20 SE 14TH STREET SUITE 204 BOCA RATON, FL 33432		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 10 SE 13th Street B4 City Boca Raton FL Zip Code 33432																									
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 <u>William C Barnett</u> DATE <u>4/14/2004</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																											
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																									
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">PD</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>BARNETT, WILLIAM C.</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>20 SE 14TH STREET, SUITE 204</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>BOCA RATON, FL 33432</td> <td></td> </tr> </table>		TITLE	PD	<input type="checkbox"/> Delete	NAME	BARNETT, WILLIAM C.		STREET ADDRESS	20 SE 14TH STREET, SUITE 204		CITY - ST - ZIP	BOCA RATON, FL 33432		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">Change <input type="checkbox"/> Addition <input type="checkbox"/></td> <td style="width: 20%;"></td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>10 SE 13th Street, Ste. B4</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> </table>		TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>		NAME			STREET ADDRESS	10 SE 13th Street, Ste. B4		CITY - ST - ZIP		
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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 empowered.																											
SIGNATURE: <u>William C Barnett</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<u>4/14/2004 (561) 338-9336</u> <small>Date Daytime Phone #</small>																									