2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # J44532 1. Entity Name

O'GWEN L. KING & ASSOCIATES, P.A.

FILED Feb 04, 2004 08:00 AM **Secretary of State**

Principal Place of Business

% O'GWEN L. KING 1622 N. 9TH AVE. PENSACOLA, FL 32503 Mailing Address

% O'GWEN L. KING 1622 N. 9TH AVE. PENSACOLA, FL 32503



01292004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-2743887

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KING, O'GWEN L. 1622 N. 9TH AVE. PENSACOLA, FL 32503

SIGNATURE:

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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 Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE				
		9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	A STATE OF THE STA
10.	OFFICERS AND DIREC	CTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP KING, O'GWEN L. 1622 N. 9TH AVE. PENSACOLA, FL		_ :=	U00000036267 02/06/04-80051-012 150.00
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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.				

FICER OR DIRECTOR