2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2004
Secretary of State

DOCUMENT# J90585

Entity Name: DOWD, WHITTAKER & KILLORIN, C.P.A.'S, P.A.

Current Principal Place of Business:

% JOHN F. DOWD
1521 SOUTH TAMIAMI TRAIL, SUITE 303
VENICE, FL 34292

New Principal Place of Business:

% JOHN F. DOWD
1521 SOUTH TAMIAMI TRAIL, SUITE 303
VENICE, FL 34285

Current Mailing Address:

% JOHN F. DOWD
1521 SOUTH TAMIAMI TRAIL, SUITE 303
VENICE, FL 34292

New Mailing Address:

% JOHN F. DOWD
1521 SOUTH TAMIAMI TRAIL, SUITE 303
VENICE, FL 34285

FEI Number: 59-2845665 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DOWD, JOHN F.
1521 SOUTH TAMIAMI TRAIL
SUITE 303
VENICE, FL 34292

Name and Address of New Registered Agent:

DOWD, JOHN F.
1521 SOUTH TAMIAMI TRAIL
SUITE 303
VENICE, FL 34285

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: _____ 01/06/2004
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: DOWD, JOHN F.,
Address: 1521 SOUTH TAMIAMI TRAIL
City-St-Zip: VENICE, FL

Title: D ( ) Delete
Name: THOMAS E. WHITTAKER,
Address: 1521 S. TAMIAMI TRAIL, #303
City-St-Zip: VENICE, FL

Title: D ( ) Delete
Name: KILLORIN, JAMIE M.
Address: 1521 S. TAMIAMI TRAIL, #303
City-St-Zip: VENICE, FL 34292

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: DOWD, JOHN F.,
Address: 1521 SOUTH TAMIAMI TRAIL
City-St-Zip: VENICE, FL 34285

Title: D (X) Change ( ) Addition
Name: THOMAS E. WHITTAKER,
Address: 1521 S. TAMIAMI TRAIL, #303
City-St-Zip: VENICE, FL 34285

Title: D (X) Change ( ) Addition
Name: KILLORIN, JAMIE M.
Address: 1521 S. TAMIAMI TRAIL, #303
City-St-Zip: VENICE, FL 34285

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: JOHN F. DOWD PRES 01/06/2004
Electronic Signature of Signing Officer or Director — Date