2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 04, 2004 08:00 AM Secretary of State

ANNUAL REPURI							Secretary of Stat			
DOCUMENT # K70454 1. Entity Name RICHARD T. MOREHEAD, P.A.							~	y concounty	01 ~ 00	
Principal Plac	ce of Business		Mailing Address		<u> </u>	1				
444 THIRD STREET			444 THIRD STREET							
NEPTUNE BEACH, FL 32266			NEPTUNE BEACH, FL 32266							
						E JOHN BUILDING		ET MEDIE DINTA NINI NAMEL N	(WALKE MAL LE SOLET	
2. Principal Place of Business 3. Mailing Address									HILIOTAL II IOOL	
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State, Apt #, etc			Suite, Apt. #, etc.			04192004	Chg-P	CR2E034 (10/03)	
City & State			City & State			4. FEI Numb			Applied For	
City of State			City to State			59-293			Not Applicable	
Zιp		Country	Zip	Cour	ntry	1		\$9.76		
				<u> </u>		5. Certificate	of Status Desired	Fee Requir		
	6. Name	and Address of Curren	nt Registered Agent		Name	7. Name and	Address of New	Registered Agent		
MOREHE	AD, RICHA	ARD T.			l larie					
444 THIRD STREET			Street Addres		Street Address	(P.O. Box Numb	er is Not Acceptab	ie)		
NEPTUNE	E BEACH, I	FL 32266								
								· · · · · · · · · · · · · · · · · · ·		
					City			FL Zip Co	đe	
8. The above the obligat	named entity tions of regist	y submits this statement ered agent.	for the purpose of changing it	s register	ed office or registe	red agent, or bo	th, in the State of F	lorida. I am familiar with	, and accept	
SIGNATURE.										
		or priched name of registered ager	nt and title if applicable (NO	IE Registeri	at Agent signalure require	d when reinstating)		DATE	-	
		FEE IS \$150.00 4 Fee will be \$550	9. Election Campa Trust Fund Cor			.00 May Be led to Fees				
10.		OFFICERS AN	D DIRECTORS	11.		ADDITIONS	CHANGES TO OF	FICERS AND DIRECTO	RS IN 11	
TITLE	PD		☐ Delete	TiT(E		Linnard	Change	Addition	
NAME	1	AD, RICHARD T.		N4ME			ՄԱՄՄՄՄՄ - ԻՐՄ ՄՈՐՄ ՄՈՒՄ)155537 ^{□ Change} -80041-025 19		
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	ATLANTIC	, BEACH, FL 32233		_						
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TITLE			☐ Delete	HL	Ł			☐ Change	☐ Addition	
NAME	}			NAN						
STREET ADDRESS CITY-ST-ZIP	ļ				EET ADORESS '-ST-ZIP					
TITLE	 			-1						
NAME	}		Detete	TOTE NAM	- i			☐ Change	Addition	
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NAME	}			NAM	1					
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TITLE	 		☐ Deiele	1116	~ ~~			☐ Change	Addition	
NAME]		La Datte	NAM	·			L. Unange	T Vagurou	
STREET ADDRESS)			STRE	ET ADDRESS					
CITY-ST-ZIP	<u> </u>			CITY	-ST-ZIP					
12. I hereby a	certify that the	e information supplied with	th this filing does not qualify fo	or the exe	mption stated in Se	ection 119.07(3)(), Florida Statutes	I further certify that the	information	
of the cor	poration or th	e receiver or trustee emp	is true and accurate and that cowered to execute this report	regui	red by Chapter 607	same legal eriec 7. Florida Statute	r as ir made under s; and that my nam	uairi; iriat i am an oifice ne appears in Block 10 (ir or director or Block 11 if	
cuanged,	Ells hs no ro ,	connent with an agraress.	With all other like empowere	/ /		_				
SIGNAT	URE:	KK	I VIN-	J	•	4-20	7-04	90488/90	205	
		SIGNATURE AND TYPED OR	PHINTED NAME OF SIGNING OFFICER	OR DIRECT	TOR		Date	Daytime Phone #		