


2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # L35950 1. Entity Name THE WILLIAM M. LEE COMPANY	
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Principal Place of Business 2548 MARSTON ROAD TALLAHASSEE, FL 32312	Mailing Address % P.O. BOX 3761 TALLAHASSEE, FL 32315
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DO NOT WRITE IN THIS SPACE

FILED
04 APR 26 PM 3:34
**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**



04132004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2985372	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 THOMPSON, SUSAN S 3520 THOMASVILLE ROAD, 4TH FLOOR TALLAHASSEE, FL 32308
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____

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
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P LEE, WILLIAM M 2609 MARSTON ROAD TALLAHASSEE, FL 32312
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300035822743 05/10/04--01081--016 **150.00 DO NOT WRITE IN THIS SPACE
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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 M Lee President</u>	<u>4-13-04</u>	<u>850-599-1955</u>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date</small>	<small>Daytime Phone #</small>