


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 22, 2004 08:00 AM
Secretary of State

DOCUMENT # L78690 1. Entity Name COURT PROGRAMS OF NORTHERN FLORIDA, INC.	
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Principal Place of Business 6860 S. CAROLINE ST 2A MILTON, FL 32570 US	Mailing Address 6860 S. CAROLINE ST 2A MILTON, FL 32570 US
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DO NOT WRITE IN THIS SPACE



03162004 No Chg-P QR2E034 (10/03)

4. FEI Number 65-0202015	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent ROTHBART, GLEN 6860 CAROLINE ST STE 2A MILTON, FL 32570

**DO NOT WRITE
IN THIS SPACE**

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 _____
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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	04/22/04-80021-007 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROTHBART, GLEN 6860 CAROLINE STREET SUITE 2A MILTON, FL 32570
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ROTHBART, DAVID 6860 CAROLINE STREET SUITE 2A MILTON, FL 32570
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: <i>Glen Rothbart</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<i>Glen Rothbart</i> <small>Pres</small>	<i>4-20-04</i> <small>Date</small>	<i>850-626-4454</i> <small>Daytime Phone #</small>
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