

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L87819

FILED
Apr 30, 2004
Secretary of State

Entity Name: PRECISION APPROACH, INC.

Current Principal Place of Business:

290 S. S.R. 434
ALTAMONTE SPRINGS, FL 32714 US

New Principal Place of Business:

Current Mailing Address:

7630 KINGS PASSAGE AVE.
ORLANDO, FL 32835 US

New Mailing Address:

FEI Number: 59-3018268 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HIGH, SHERRY
7630 KINGS PASSAGE AVE
ORLANDO, FL 32835 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTC () Delete
Name: HIGH, SHERRY,
Address: 7630 KINGS PASSAGE AVE
City-St-Zip: ORLANDO, FL 32835

Title: VD () Delete
Name: HIGH, WALTER C.,
Address: 7630 KINGS PASSAGE AVE
City-St-Zip: ORLANDO, FL 32835

Title: D () Delete
Name: PEARCE, MIKE,
Address: 9895 WINDWARD SLOPES DRIVE
City-St-Zip: LAKELAND, TN 38002

Title: D () Delete
Name: STARCKE, ELIZABETH K
Address: RO 625, 444 BRICKELL AVE STE 51
City-St-Zip: MIAMI, FL 331312492

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SHERRY HIGH

P

04/30/2004

Electronic Signature of Signing Officer or Director

Date