

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M69965

FILED  
Apr 25, 2005  
Secretary of State

Entity Name: 204 CENTURY CORP., INC.

## Current Principal Place of Business:

204 CENTURY 21 DRIVE  
JACKSONVILLE, FL 32216

## New Principal Place of Business:

## Current Mailing Address:

204 CENTURY 21 DRIVE  
JACKSONVILLE, FL 32216

## New Mailing Address:

FEI Number: 59-2879905

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DEESE, PAUL N.  
#602  
1551 SOUTH 1ST STREET  
JACKSONVILLE, FL 32250 US

## Name and Address of New Registered Agent:

DEESE, PAUL N.  
545 C.R. 217  
JACKSONVILLE, FL 32234 US

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:

04/25/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: DEESE, PAUL N.,  
Address: 1551 S. 1ST ST., APT.602  
City-St-Zip: JAX. BCH., FL

Title: SD ( ) Delete  
Name: TIPTON, ROBERT C.,  
Address: 26 TALLWOOD RD.  
City-St-Zip: JAX. BCH., FL

Title: ASD (X) Delete  
Name: CURY, N. GENE,  
Address: 3100 UNIVERSITY BLVD.,S.  
City-St-Zip: JAX, FL

Title: D (X) Delete  
Name: CURY, BETTY D.,  
Address: 3100 UNIVERSITY BLVD.,S.  
City-St-Zip: JAX, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: DEESE, PAUL N.,  
Address: 545 C.R. 217  
City-St-Zip: JACKSONVILLE, FL 32234

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: PAUL N. DEESE

PD

04/25/2005

Electronic Signature of Signing Officer or Director

Date