

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # M97752

1. Entity Name
RONALD E. OSTRANDER, P.A.



Principal Place of Business
7000 48TH ST., NORTH
PINELLAS PARK, FL 33781 US

Mailing Address
7000 48TH ST., NORTH
PINELLAS PARK, FL 33781 US

FILED
Jan 23, 2004 08:00 AM
Secretary of State



01202004 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0084004 Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**OSTRANDER, RONALD
7000 48TH ST., NORTH
PINELLAS PARK, FL 34665**

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	OSTRANDER, RONALD E.
STREET ADDRESS	7000 48TH ST., NORTH
CITY - ST - ZIP	PINELLAS PARK, FL
TITLE	STD
NAME	OSTRANDER, RONALD E.
STREET ADDRESS	7000 48TH ST., NORTH
CITY - ST - ZIP	PINELLAS PARK, FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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01/23/04-80054-025 150.00

**DO NOT WRITE
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: *Ronald E. Ostrander* RONALD E. OSTRANDER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-21-04 (727) 522-6600

Date

Daytime Phone #