

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005505

FILED
Jan 13, 2004
Secretary of State**Entity Name:** F F O, INC.**Current Principal Place of Business:**22 N. WASHINGTON AVE.
TITUSVILLE, FL 32796 US**New Principal Place of Business:****Current Mailing Address:**22 N. WASHINGTON AVE.
TITUSVILLE, FL 32796 US**New Mailing Address:****FEI Number:** 43-2020436**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**TAYLOR, RICHARD
3150 N. WICKHAM ROAD
SUITE 3
MELBOURNE, FL 32935 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

OFFICERS AND DIRECTORS:**Title:** P () Delete
Name: COOK, WILLIAM M
Address: 22 N WASHINGTON AVE.
City-St-Zip: TITUSVILLE, FL 32796 US**Title:** VP () Delete
Name: COOK, WILLIAM M
Address: 22 NORTH WASHINGTON AVE
City-St-Zip: TITUSVILLE, FL 32796 US**Title:** S () Delete
Name: COOK, ELAINE P
Address: 22 N WASHINGTON AVE
City-St-Zip: TITUSVILLE, FL 32796 US**Title:** T () Delete
Name: COOK, ELAINE P
Address: 22 N WASHINGTON AVE
City-St-Zip: TITUSVILLE, FL 32796 US**Title:** () Delete
Name:
Address:
City-St-Zip:**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
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City-St-Zip:**Title:** () Change () Addition
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Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** D () Change (X) Addition
Name: TAYLOR, RICHARD
Address: 3150 NORTH WICKHAM ROAD, SUITE 3
City-St-Zip: MELBOURNE, FL 32935**Title:** D () Change (X) Addition
Name: MILLER, RODNEY
Address: 22 NORTH WASHINGTON AVENUE
City-St-Zip: TITUSVILLE, FL 32976

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM M COOK

PVP

01/13/2004

Electronic Signature of Signing Officer or Director

Date