2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 12, 2004 8:00 am Secretary of State

1. Entity Nam	ne	# N03000010 FOCUS, INC.)/14	,					U4-12	2-2004	90258 ()2/ ******e	01.25
Principal Place of Business 4853 S ORANGE AVE STE C ORLANDO, FL 32806 Mailing Address 4853 S ORANGE AVE STE C ORLANDO, FL 32806 ORLANDO, FL 32806					ΈC			4 14 \$ 111 \$ 1	II Beibe 1911 T				a ngi a 1 (a2)
2. Principal P	Place of Busine	988	3. Maili	ng Address	• • • • • • • • • • • • • • • • • • • •								
Suite, Apt. #, etc.			Suite, Apt. #, etc.					04082004	Chg-NF	•	CR2E0	37 (10/03)	•
City & State			City	& State			4. FEI Numb		4368	300		pplied For ot Applicable	
Zip	Zip Country		Zip		Cour	ntry		52-2436800 Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required					
	6. Name a	and Address of Current	Registered	Agent				7. Name and	d Address o	of New Re	egistered	Agent	
OTEMBED	CED IOU	N 500				Name							
4853 S OR	RGER, JOH RANGE AVI D. FL 3280	E STE C					ddress (F	P.O. Box Numb	per is Not Ad	ceptable)		
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						City					FL	■ Zip Coc	16
		submits this statement fo	r the purpo	se of changing its	egistere	d office or	register	ed agent, or be	oth, in the S	tate of Flo	rida. Lam	familiar with	, and accept
the obligat	tions of registe	ered agent.											
							,,,,,			- .			
SIGNATURE.		or printed name of registered agent	and title if soci	cable (NOTE	Panistared	Accet sineship		when reinstaling)			DATE		
* #		printed name of registered again	and the ii appi	table. (NOTE:	negislereu	Agent signatu	re required	when reinstaling)			-		
T T	Filing Fee	is \$61.25 ay 1, 2004		9. Election Cam Trust Fund C	paign Fi	nancing	re required	\$5.00 May Added to Fee:		M Flori	ake chec	k payable triment of S	to State
	Filing Fee Due by M	e is \$61.25		9. Election Cam	paign Fi	nancing		\$5.00 May	S .	Flori	ake chec	rtment of S	itate 1
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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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

I 1..

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO