

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000017398

**FILED**  
**Apr 26, 2004**  
**Secretary of State**

**Entity Name:** CLADIN & ASSOCIATES, P.A.

**Current Principal Place of Business:**

2169 MAIN ST.  
SARASOTA, FL 342376023

**New Principal Place of Business:**

3650 WEBBER STREET  
SUITE H  
SARASOTA, FL 342324413 US

**Current Mailing Address:**

2169 MAIN ST.  
SARASOTA, FL 342376023

**New Mailing Address:**

3650 WEBBER STREET  
SUITE H  
SARASOTA, FL 342324413 US

FEI Number: 65-0947316

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CLADIN, DAVID G  
2169 MAIN ST.  
SARASOTA, FL 342376023

**Name and Address of New Registered Agent:**

CLADIN, DAVID G  
3650 WEBBER STREET  
SARASOTA, FL 342324413 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: DAVID G. CLADIN

04/26/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: CLADIN, DAVID G  
Address: 2169 MAIN ST.  
City-St-Zip: SARASOTA, FL 342376023

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DSP (X) Change ( ) Addition  
Name: CLADIN, DAVID G  
Address: 3650 WEBBER ST., SUITE H  
City-St-Zip: SARASOTA, FL 342324413 US

Title: VP ( ) Change (X) Addition  
Name: CLADIN, GENEVA I  
Address: 3650 WEBBER STREET, SUITE H  
City-St-Zip: SARASOTA, FL 342324413 US

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: DAVID G. CLADIN

DSP

04/26/2004

Electronic Signature of Signing Officer or Director

Date