

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 05, 2004 8:00 am**  
**Secretary of State**

02-05-2004 90016 037 \*\*\*150.00

**DOCUMENT # P00000019725**

1. Entity Name  
**BARTRAM INVESTMENTS, INC.**



Principal Place of Business  
**2325 ULMERTON RD  
STE 20  
CLEARWATER, FL 33762**

Mailing Address  
**2325 ULMERTON RD  
STE 20  
CLEARWATER, FL 33762**



01232004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-3708290</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

**MORRIS, GREGORY D  
2325 ULMERTON RD  
STE 20  
CLEARWATER, FL 33762**

**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 \_\_\_\_\_ (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 NAME STREET ADDRESS CITY-ST-ZIP	<b>D MCNEEL, VAN L 5401 WEST KENNEDY BLVD. SUITE 751 TAMPA, FL 33609</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PST DODSON, J THOMAS JR 13361 ATLANTIC BLVD. JACKSONVILLE, FL 32225</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S MORRIS, GREGORY D 2325 ULMERTON ROAD, SUITE 20 CLEARWATER, FL 33762</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**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)(i), 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: *Gregory D. Morris*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/30/04 727-576-6424  
Date Daytime Phone #