## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000025775

119 S. KENTUCKY AVE

LAKELAND, FL 33801

Address: City-St-Zip:

Name: SPIESSI MELTON AND ASSOCIATES INC

FILED Jul 06, 2004 Secretary of State

Entity Nar	me: SPIESSL	MELTON AND ASSOCIATES,	INC.		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	NTUCKY AVE D, FL 33801				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
119 S. KENTUCKY AVE LAKELAND, FL 33801			P O BOX 481 LAKELAND, FL 33802	P O BOX 481 LAKELAND, FL 33802	
FEI Number:	: 59-3588335	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
119 S. KEN LAKELANI The above	JANET REBE NTUCKY AVE D, FL 33801 named entity: e of Florida.		ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUR					
	Electror	ic Signature of Registered Age	ent	Date	
		3(2)(b), F.S., the corporation did no g Trust Fund Contribution (  ).	t receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD ( ) MELTON, THOI 119 S. KENTUC LAKELAND, FL	CKY AVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	SD ( ) MELTON, JANE 119 S. KENTUC LAKELAND, FL	CKY AVE.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	TD ( ) TUCKER, JANE	Delete TH	Title: Name:	( ) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: JANET REBECCA T MELTON SD 07/06/2004