

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000034568

Entity Name: JAN HOOKS, P.A.

FILED
Jan 12, 2004
Secretary of State

Current Principal Place of Business:

7921 COUNTY 183 SOUTH
PONCE DELEON, FL 32455

New Principal Place of Business:

2383 US HWY 98 WEST
SANTA ROSA BEACH, FL 32459

Current Mailing Address:

PO BOX 428
DEFUNIAK SPRINGS, FL 32435

New Mailing Address:

2383 US HWY 98 WEST
SANTA ROSA BEACH, FL 32459

FEI Number: 59-3648004

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOOKS, JAN
7921 COUNTY 183 SOUTH
PONCE DELEON, FL 32455

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: HOOKS, JAN
Address: 7921 COUNTY 183 SOUTH
City-St-Zip: PONCE DELEON, FL 32455

Title: DVS () Delete
Name: HOOKS, JOHN W II
Address: 7921 COUNTY 183 SOUTH
City-St-Zip: PONCE DELEON, FL 32455

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JAN N HOOKS

PTD

01/12/2004

Electronic Signature of Signing Officer or Director

Date