

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90283 007 ***150.00

DOCUMENT # P00000051307

1. Entity Name

BEZMEN AND ASSOCIATES, INC.



Principal Place of Business

**6680-1 COLUMBIA PARK DR. SOUTH
JACKSONVILLE, FL 32258**

Mailing Address

**6680-1 COLUMBIA PARK DR. SOUTH
JACKSONVILLE, FL 32258**



04212004

No Chg-P

CR2E034 (10/03)

4. FEI Number

59-3657939

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**WILBER, CARL
6680-1 COLUMBIA PARK DR. SOUTH
JACKSONVILLE, FL 32258**

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating.)

DATE

**FILE NOW!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Elective Campaign Financing
Trust Fund Contribution.



**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
D
NAME
BEZMEN, WAYNE J
STREET ADDRESS
6680-1 COLUMBIA PARK DR. SOUTH
CITY - ST - ZIP
JACKSONVILLE, FL 32258

TITLE
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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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WAYNE J. Bezmen
President

Date

4/27/04

Daytime Phone #

904-534-4311