2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P00000057167

1. Entity Name
MARK VOST, PA.

Principal Place of Business	Mailing Address
103 BRUSHWOOD LANE PALM COAST, FL 32137	103 BRUSHWOOD LANE PALM COAST, FL 32137

07022004   No Chg-P   CR2E034 (10/03)

4. FEI Number
59-3648643

Applied For
Not Applicable

5. Certificate of Status Desired ☐

$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

VOST, MARK
103 BRUSHWOOD LANE
PALM COAST, FL 32137

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 _____ MARK R. VOST, PRESIDENT   7/2/04

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $550.00
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

$5.00 May Be Added to Fees

10.   OFFICERS AND DIRECTORS

TITLE	DP
NAME	VOST, MARK
STREET ADDRESS	103 BRUSHWOOD LANE
CITY-ST-ZIP	PALM COAST, FL 32137

TITLE	
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CITY-ST-ZIP	

U000010163299
07/06/04-80007-023 550.00

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ MARK R. VOST President 7/2/04   447.30_   386

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #