2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 09, 2004 8:00 am Secretary of State 02-09-2004 90044 036 ***150.00

DOCUMENT # P00000073133 1. Entity Name ROSS & LOGAN INDUSTRIES, INC.									,	02-09-20	04 90044 0			
Principal Place of Business 1309 LANE CIRCLE EAST IACKSONVILLE, FL 32254				130	Mailing Address 1309 LANE CIRCLE EAST JACKSONVILLE, FL 32254				54003855					
2. Principal Place of Business				3. Mailing Address										
Suite, Apt. #, etc.				Suite, Apt. #, etc.					02062004	Chg-P	CR2E	034 (10/03)		
City & State				City & State					4. FEI Numb 59-366			No	plied For t Applicable	
Zip	Country				Zip Cour				5. Certificate of Status Desired					
	6. Name	and Addres	s of Current	Registe	red Agent		Name		7. Name and	Address of Ne	w Registered	Agent		
LARRY BRANTLEY 1309 LANE CIRCLE EAST JACKSONVILLE, FL 32254								Street Address (P.O. Box Number is Not Acceptable)						
							City		<u> </u>	<u></u>	FI	Zip Code	e	
		ty submits thi tered agent.	s statement fo	or the pu	rpose of changing it	s registe	red office or	register	red agent, or bo	th, in the State of			and accept	
SIGNATURE_	Signature, typed	or printed name	of registered agent	and litle if a	ipplicable. (NO	TE: Register	red Agent signatu	ne required	when reinstating)		DATE			
FILE NOWILL FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees														
10. OFFICERS AND D					DIRECTORS 11.					/CHANGES TO		D DIRECTOR	S IN 11	
TITLE	P	DANTIEV			☐ Delete : TITLE					- Treas	urer	Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	1309 LAN	RANTLEY NE CIRCLE NVILLE, FL			NAM STR CIT			130		circle le, Fu		,		
TITLE	D				☐ Delete TIT			Vice	Presiden	t + Sec		Change	Addition	
NAME STREET ADDRESS	KAREN BRANTLEY 1309 LANE CIR EAST				N.				en Bra 9 Lane	ntlex Circle	East			
CITY-ST-ZIP	JACKSONVILLE, FL 32254				CI				CKSONVI		3225	f		
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NAME STREET ADDRESS	1				. ST									
CITY-ST-ZIP 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.													nformation r or director	
of the corporation of the received 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.													r Block 11 if	
SIGNAT	TURE:	SIGNATUR	E AND TYPEDOR	PRINTED	NAME OF SIGNING OFFICE	ER OR DIRE	ECTOR		8	4 C 4	904	-3 28 - Daytime Phone #	9700	