

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 30, 2004 08:00 AM**  
**Secretary of State**

|                                                    |                                                                                   |
|----------------------------------------------------|-----------------------------------------------------------------------------------|
| <b>DOCUMENT # P00000088612</b>                     |  |
| <b>1. Entity Name</b><br>RANCOURT & ASSOCIATES INC |                                                                                   |

**Principal Place of Business**  
1339 BEVILLE ROAD  
DAYTONA BEACH, FL 32119

**Mailing Address**  
1339 BEVILLE ROAD  
DAYTONA BEACH, FL 32119

**DO NOT WRITE IN THIS SPACE**



04152004 No Chg-P CR2E034 (10/03)

|                                                                  |                                                               |
|------------------------------------------------------------------|---------------------------------------------------------------|
| <b>4. FEI Number</b><br>58-3871770                               | <b>Applied For</b><br><input type="checkbox"/> Not Applicable |
| <b>5. Certificate of Status Desired</b> <input type="checkbox"/> | <b>\$8.75 Additional Fee Required</b>                         |

## 6. Name and Address of Current Registered Agent

ADAIR, MELODY H  
1339 BEVILLE ROAD  
DAYTONA BEACH, FL 32119

**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's signature required when releasing)

**DATE**

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

**9. Election Campaign Financing**  
Trust Fund Contribution ☐

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

U00000144631  
04/30/04-80140-003 150.00

## 10. OFFICERS AND DIRECTORS

|                       |                         |
|-----------------------|-------------------------|
| <b>TITLE</b>          | D                       |
| <b>NAME</b>           | RANCOURT, EDMOND R      |
| <b>STREET ADDRESS</b> | 1339 BEVILLE ROAD       |
| <b>CITY-ST-ZIP</b>    | DAYTONA BEACH, FL 32119 |

|                       |  |
|-----------------------|--|
| <b>TITLE</b>          |  |
| <b>NAME</b>           |  |
| <b>STREET ADDRESS</b> |  |
| <b>CITY-ST-ZIP</b>    |  |

|                       |  |
|-----------------------|--|
| <b>TITLE</b>          |  |
| <b>NAME</b>           |  |
| <b>STREET ADDRESS</b> |  |
| <b>CITY-ST-ZIP</b>    |  |

|                       |  |
|-----------------------|--|
| <b>TITLE</b>          |  |
| <b>NAME</b>           |  |
| <b>STREET ADDRESS</b> |  |
| <b>CITY-ST-ZIP</b>    |  |

|                       |  |
|-----------------------|--|
| <b>TITLE</b>          |  |
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| <b>CITY-ST-ZIP</b>    |  |

|                       |  |
|-----------------------|--|
| <b>TITLE</b>          |  |
| <b>NAME</b>           |  |
| <b>STREET ADDRESS</b> |  |
| <b>CITY-ST-ZIP</b>    |  |

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IN THIS SPACE**

**12. I hereby certify that the information furnished with this filing does not qualify for the exemption stated in Section 19.07(3)(b), 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 or other like empowered.**

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/04

DATE

Daytime Phone #