2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000102205

Name:

Address:

City-St-Zip:

ALDRICH, MELISSA

3648 GALWAY LANE

ORMOND BEACH, FL 32174

ALDRICH & ASSOCIATES OF SANFORD, INC

FILED May 30, 2004 Secretary of State

Entity Nan	ne: ALDRICH	1 & ASSUCIATES OF SANFOR	D, INC.		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
211 TOWN SANFORD	IE CENTER C , FL 32771	IRCLE			
Current Mailing Address:			New Mailing Address:		
3648 GALV ORMOND	VAY LANE BEACH, FL 3	2174			
FEI Number:	59-3682234	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
SUITE B PALM COA	of Florida.	7 US	urpose of changing its registered	d office or registered agent, or both,	
Electronic Signature of Registered Agent			nt	Date	
Election Can		3(2)(b), F.S., the corporation did no g Trust Fund Contribution (). TORS:	·	ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () ALDRICH, SAN 28 SEA VISTA PALM COAST,	DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () ALDRICH, TOD 3648 GALWAY ORMOND BEA	LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title [.]	D (Delete	Title [.]	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: TODD R. ALDRICH D 05/30/2004