

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000116697

FILED  
Apr 01, 2004  
Secretary of State

Entity Name: SHARON K. COOPER, C.P.A., P.A.

## Current Principal Place of Business:

1435 E. VENICE AVE  
276  
VENICE, FL 34292

## New Principal Place of Business:

8499 S. TAMiami TRAIL  
252  
SARASOTA, FL 34238

## Current Mailing Address:

1435 E. VENICE AVE 276  
VENICE, FL 34292

## New Mailing Address:

8499 S. TAMiami TRAIL #252  
SARASOTA, FL 34238

FEI Number: 65-1067864

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
343 ALMERIA AVENUE  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete  
Name: COOPER, SHARON K  
Address: 1435 E VENICE AVE 276  
City-St-Zip: VENICE, FL 34292

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition  
Name: COOPER, SHARON K  
Address: 8499 S. TAMiami TRAIL #252  
City-St-Zip: SARASOTA, FL 34238

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.

SIGNATURE: SHARON K. COOPER

PRES

04/01/2004

Electronic Signature of Signing Officer or Director

Date