2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000117314

City-St-Zip:

JACKSONVILLE, FL 32217

Entity Name: STEVEN VOCKELL & ASSOCIATES, INC.

FILED Jan 29, 2004 Secretary of State

Current F	Principal Place	of Business:	New Principal Place of Business:	New Principal Place of Business:		
SUITE 3 1		250	9140 GOLFSIDE DRIVE SUITE #13N			
JACKSOI	NVILLE, FL 322	206	JACKSONVILLE, FL 32256			
Current P	Mailing Addres	ss:	New Mailing Address:			
SUITE 3 1	LFSIDE DRIVE 13N NVILLE, FL 322	256	9140 GOLFSIDE DRIVE SUITE #13N JACKSONVILLE, FL 32256			
FEI Numbe	r: 59-3681904	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desir	ed ()		
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:	Name and Address of New Registered Agent:		
8408 BRIE	_, STEVEN T ERWOOD ROA NVILLE, FL 322					
	e named entity : te of Florida.	submits this statement for th	ne purpose of changing its registered office or registered agent	, or both,		
SIGNATU	IRE:					
	Electror	nic Signature of Registered A	Agent Date			
Election Ca	ımpaign Financin	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND D	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address:	D () VOCKELL, STE 8408 BRIERW		Title: () Change () Addition Name: Address:			

City-St-Zip:

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: STEVEN T. VOCKELL D 01/29/2004