2004 FOR PROFIT CORPORATION ANNUAL REPORT				FILED Jan 12, 2004 08:00 AM		
1. Entity Nam	MENT # P00000117: chfield, p.a.	535		Secretary of State		
3303 PARK ST		Mailing Address 3303 PARK ST JACKSONVILLE, FL 32205	RK ST			
D	DO NOT WRITE IN THIS SPA		CE	01062004 No Chg-P CR2E034 (10/03)   4. FEI Number Applied For   59-3688462 Not Applicable   5. Certificate of Status Desired \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent BIRCHFIELD, W.O. 3303 PARK ST JACKSONVILLE, FL 32205			DO NOT WRITE IN THIS SPACE			
the obligati SIGNATURE	named entity submits this statement for ions of registered agent. Signature, types or printed name of registered agent at E NOWIII FEE IS \$150.00 ay 1, 2004 Fee will be \$550.0	ed site it applicable. (HOTE. Register 9. Election Campaign Fina	ed Agent signature required		DATE	
10. TITLE NAME STREET ADDRESS GITY- ST-ZP TITLE NAME STREET ADDRESS	OFFICERS AND D P BIRCHFIELD, W. O. 3303 PARK ST JACKSONVILLE, FL 32205	WRECTORS			- U00000002027 1/12/04-00035-019 150.00	
CGY - ST-ZIP URLE NAME STREET ADDRESS CITY - ST-ZIP			DO NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			- <del>يۇرىمىرىمۇر ئۇرىمىرىكى بىرىكىرىكى بىرىكىرىكى بىرىكى بىرىكى بىرىكى بىرىكى بىرىكى بىرىكى بىرىكى بىرىكى بىرىكى بى</del>	IN IH	IS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP				мана, <sup>с</sup> . Социна, <u>с. М.</u> М	с. с. <sup>с.</sup> ". Т.Ш. с. Фин. ос. 	
12. I hereby o	roration or the receiver or trustee empo or on an attachment with an address, w	this filling does not qualify for the ex- true and accurate and that my sign wered to execute this report as requ ith all other like empowered.	ired by Chapter 60	ection 119.07(3)(l), Flor same legal effect as if 7, Florida Statutes; and	ida Statutes. I further certily that the information made under oath; that I am an officer or director I that my name appears in Block 10 or Block 11 if 2007 904-737-2020 Davime Phone #	