## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P01000004443**

1. Entity Name
WILLIAM J. MCCLELLAN, P.A.

Principal Place of Business

638 BROADWAY AVE

ORLANDO, FL 32803

CITY-SI-ZIP

Mailing Address

638 BROADWAY AVE

ORLANDO, FL 32803

FILED Jan 12, 2004 08:00 AM Secretary of State



01052004

## DO NOT WRITE IN THIS SPACE

4.	FEI Number 59-3691755	, <b></b>	Applied For Not Applicable
5.	Certificate of Status Desired		\$8.75 Additional Fee Required

No Chg-P

CR2E034 (10/03)

6. Name and Address of Current Registered Agent

DIETZ, WILLIAM J
25 S MAGNOLIA AVE
ORLANDO, FL 32801

DO NOT WRITE
IN THIS SPACE

			IN THIS STAGE			
	named entity submits this statement for the pions of registered agent.	surpose of changing its register	ed office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE_	Signature, typed or printed name of registered agent and title :	f applicable. (NOTE: Registere	d Agent aignature	e required when remaining)	CATE	
Fil. After M:	E NOW!!! FEE IS \$150.00 ny 1, 2004 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.	scing	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS			<u> </u>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/P MCCLELLAN, WILLIAM J 638 BROADWAY AVE ORLANDO, FL 32803				1300000001892	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					01/12/04-80029-013 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE	
RTLE NAME STREET ADDRESS CITY-ST-ZIP						
DIRE NAME STREET ADDRESS						

12. I hereby certify that the information supplied with this filling does not qualify 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 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 rustee empowered to execute fails report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an affective my light in address with Photiger like empowered.

President

SIGNATURE: SIGNATURE AND TYPED OR MARKED NAME OF SIGNING OFFICER OR DIRECTOR

18/04 407-648-1525