


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 13, 2004 8:00 am
Secretary of State

01-13-2004 90011 049 ***150.00

DOCUMENT # P01000056988		
1. Entity Name JEFFREY D. PERRY, P.A.		
Principal Place of Business 1001 CHERRY ST. KISSIMMEE, FL 34741		Mailing Address 1001 CHERRY ST. KISSIMMEE, FL 34741
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent PERRY, JEFFREY D 2711 SCARBOROUGH DR. KISSIMMEE, FL 34744		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PERRY, JEFFREY D 419 W. OAK ST 1001 W. CHERRY ST. SUITE B KISSIMMEE, FL 34741	
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12. I hereby certify that the information supplied with this filing 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <u>Jeffrey D. Perry, P.A.</u> 1/8/04 407-870-8388 _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #		