

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000059629

Entity Name: PAUL MORRISON, INC.

FILED  
Feb 25, 2004  
Secretary of State

## Current Principal Place of Business:

13300 N CLEVELAND AVE  
NORTH FORT MYERS, FL 33903 US

## New Principal Place of Business:

## Current Mailing Address:

13300 N CLEVELAND AVE  
N FORT MYERS, FL 33908

## New Mailing Address:

FEI Number: 65-1114360

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MORRISON, PAUL  
4134 GULF OF MEXICO DRIVE, SUITE 302  
LONGBOAT KEY, FL 34228

## Name and Address of New Registered Agent:

MORRISON, PAUL  
4313 SW1ST PL  
CAPE CORAL, FL 33914

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: PAUL MORRISON

02/25/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MORRISON, PAUL  
Address: 13300 N CLEVELAND AVE  
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: S ( ) Delete  
Name: DONALDSON, HAZEL  
Address: 13300 N CLEVELAND AVE  
City-St-Zip: NORTH FORT MYERS, FL 33903

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: PAUL MORRISON

PD

02/25/2004

Electronic Signature of Signing Officer or Director

Date