## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000063470

Entity Name: BARRY SCOTT, INC.

FILED Jul 01, 2004 Secretary of State

Littly Name. BARR 1 30011, INC.					
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
916 NE 26T OCALA, FL	H COURT 344706310				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
916 NE 26T OCALA, FL	H COURT 344706310				
FEI Number:	59-3727211	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of Cu	urrent Registered Agent:	Name and Address of	New Registered Agent:	
SCOTT, BARRY L 916 NE 26TH COURT OCALA, FL 344706310 US  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:					
Electronic Signature of Registered Agent			t	Date	
Election Campaign Financing Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	${\bf ADDITIONS/CHANGES\ TO\ OFFICERS\ AND\ DIRECTORS:}$	
Title: Name: Address: City-St-Zip:	D () I SCOTT, BARRY 916 NE 26TH CO OCALA, FL 344	DURT	Title: ( Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () I SCOTT, DONALI 2821 NE 3RD ST OCALA, FL 344	FREET APT 4	Title: ( Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () I SCOTT, SEAN B 934 NE 28TH AV OCALA, FL 344	ENUE	Title: ( Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () I SCOTT, MICHEA 3000 SE LAKE V OCALA, FL 344	VEIR AVENUE	Title: ( Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () I SCOTT, SANDRA 916 NE 26TH CO OCALA, FL 344	DURT	Title: ( Name: Address: City-St-Zip:	()Change ()Addition	

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: SANDRA A SCOTT DIRE 07/01/2004