

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 06, 2004 08:00 AM
Secretary of State

DOCUMENT # P01000073944	
1. Entity Name SILVEY, INC.	

Principal Place of Business 1320 CAPITAL CIRCLE SW TALLAHASSEE, FL 32310	Mailing Address 1320 CAPITAL CIRCLE SW TALLAHASSEE, FL 32310
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05032004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3736584	Approved For ☐ Not Approvable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent SILVEY, LAURA 1318 WESTHEAVEN CT. TALLAHASSEE, FL 32310

**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 _____

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

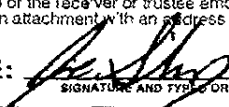
9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees
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UN00000157878
05/06/04-80046-010 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY ST ZIP	P SILVEY, LAURA 1318 WESTHEAVEN CT. TALLAHASSEE, FL 32310
TITLE NAME STREET ADDRESS CITY ST ZIP	V SILVEY, JOSEPH 1318 WESTHEAVEN CT. TALLAHASSEE, FL 32310
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 another he empowered.

SIGNATURE:  **Joe Silvey**
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-30-04 850-385-2044