## **2004 FOR PROFIT CORPORATION ANNUAL REPORT**

## FILED Jan 23, 2004 8:00 am Secretary of State 01-23-2004 90024 049 \*\*\*150.00

1. Entity Name	MENT # P0100009 COMPANY	9793					01-23-2004	90024 043		•
Principal Place of Business 208 WEST ** SHIFE ** ** ** ** ** ** ** ** ** ** ** ** **		Mailing Address  208 WEST-FBRSTH-STREET  XXIII E **400  JACKSONVILLE, FL 32202				E CHARLES TO THE				0188 
245 Riv	dace of Business Verside Avenue		245 Riverside Avenue				<b> </b>	iji <b>ab</b> ii <b>a ib</b> ii <b>a</b> ibiii i		111
Suite Apt. Suite 4	100	Suite, Apt. #, etc. Suite 400	Suite 400			01072004	Chg-P	CR2E034	·	- P 15
	nville, FL	City & State Jacksonville,		<sup>*</sup> .	4. FEI Numbe 59-3750	-		No	oplied For ot Applicable	
32202	Country USA	<sup>Zip</sup> 3220 <u>2</u>	Coun USA		5. Certificate of Status Desired		\$8.75 Additional Fee Required		litional d	
	6. Name and Address of Currer	nt Registered Agent		Name		7. Name and	Address of New F	Registered Age	ant	
MILLER, FRANK E 2003/VESTARORSYFHASTREET 独排联系400 JACKSONVILLE, FL 32202					ddress(l Rive:	P.O. Box Numbe rside Ave	r is Not Acceptablenue, Sui	e) te 400		
				City				FL	Zip Cod	в
the obligati	named entity submits this statement ions of registered agent.  Signiture typed or crimted name of registered age	EMILL				ed agent, or bot when relastating)	h, in the State of FI	Orida. I am fan	Har with,	and accept
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550	9. Election Campaig Trust Fund Contri	-	ncing 🔲		00 May Be ed to Fees				٠.
10.		D DIRECTORS	11.			ADDITIONS/	CHANGES TO OFF			
TITLE NAME	2 50.00		TITL						X Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP	-200 WEST FORSYTH STREET, SUITE 1400-		STRE	ET ADDRESS -ST-ZIP	245	Riversi	de Avenue	, Suite	400	
TITLE	PST	☐ Delete	TITU					. G	Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	MILLER, FRANK E  200 W FORSYTH STREET SU  JACKSONVILLE, FL 3220	ITE-1400-		E Et address -St-zip	245	Riversi	de Avenue	, Suite	400	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	in indian indian indian	Delete				مندن وسنده		. [	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	4						<b>]</b> Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	4						] Change	☐ Addition
TITLE NAME STREET ADDRESS I CITY-ST-ZIP		☐ Delete	•	1					Change	Addition

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 eath; 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:** 

## AHECHMANS PAPPAS METCALF JENKS & MILLER

PROFESSIONAL ASSOCIATION

ATTORNEYS AT LAW

245 RIVERSIDE AVENUE, SUITE 400

JACKSONVILLE, FLORIDA 32202-4926

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January 21, 2004

54000188

G. TODD COTTRILL
SPENCER N. CUMMINGS
THOMAS O. INGRAM
GREGORY J. LESAK. JR.
W. WILLIAM LI
CAROLINE R. NICHOLS
SCOTT G. SCHILDBERG
JOSEPH J. VAN ROOY
RUSSELL A. WADE III
KATHRYN F. WHITTINGTON

Division of Corporations Post Office Box 1500 Tallahassee, FL 32302-1500

Re: Kahilof Company – 2004 Annual Report

Dear Sir/Madam:

STEVEN B. GREENHUT

MARCIA PARKER TJOFLAT

THOMAS M. JENKS ROBERT A. LEAPLEY, JR.

JOHN G. METCALF FRANK E. MILLER

M. LYNN PAPPAS

Enclosed please find the 2004 Annual Report for Kahilof Company. Please note the address for the company and its officers and directors has been changed to 245 Riverside Avenue, Suite 400, Jacksonville, Florida 32202. I have also enclosed our firm's check number 26605 in the amount of \$150.00 as and for the filing fee.

Should you have any questions or concerns, please contact me.

Very truly yours,

Frank E. Miller

FEM/kaf Enclosures