


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90758 025 ***150.00

DOCUMENT # P02000060272 1. Entity Name WATSON CORPORATION																													
Principal Place of Business 1011 E. HIGHLAND DRIVE LAKELAND, FL 33813-1770			Mailing Address C/O HOLLAND & KNIGHT LLP 701 BRICKELL AVE STE 3000 MIAMI, FL 33131-3209																										
2. Principal Place of Business		3. Mailing Address																											
Suite, Apt. #, etc.		Suite, Apt. #, etc.																											
City & State		City & State																											
Zip	Country	Zip	Country																										
6. Name and Address of Current Registered Agent HOLLAND & KNIGHT LLC 701 BRICKELL AVENUE SUITE 3000 MIAMI, FL 33131-3209				7. Name and Address of New Registered Agent Name INTRASTATE REGISTERED AGENT CORPORATION Street Address (P.O. Box Number is Not Acceptable) 701 BRICKELL AVENUE STE. 3000 City MIAMI FL Zip 33131																									
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: <i>[Signature]</i> INTRASTATE REGISTERED AGENT CORPORATION 3/19/04 <small>Signature, typed or printed name of registered agent and title required when reinstating</small>																													
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 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">PTSD</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>BRONSON, REBECCA W</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1011 EAST HIGHLAND DRIVE</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>LAKELAND, FL 33803</td> <td></td> </tr> </table>			TITLE	PTSD	<input type="checkbox"/> Delete	NAME	BRONSON, REBECCA W		STREET ADDRESS	1011 EAST HIGHLAND DRIVE		CITY - ST - ZIP	LAKELAND, FL 33803		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;"></td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> </table>			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY - ST - ZIP		
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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: <i>Rebecca W. Bronson</i> REBECCA W. BRONSON, PRES. 4-29-04 863-648-0952 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>																													