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

**SIGNATURE** 

SIGNATURE AND TYPED OR PRINTED NAME OF

## Aug 03, 2004 8:00 am Secretary of State **DOCUMENT # P02000091025** 1. Entity Name 08-03-2004 90004 004 \*\*\*150.00 SPEAR AND JACKSON, INC. Principal Place of Business Mailing Address 2200 CORPORATE BLVD 2200 CORPORATE BLVD **12000471** SUITE 314 SUITE 314 BOCA RATON, FL 33431 BOCA RATON, FL 33431 3. Mailing Address 2. Principal Place of Business 6001 Park of Commerce Blvd 6001 Park of Commerce Blvd Suite, Apt. #, etc. Suite Apt # etc. 07132004 CR2E034 (10/03) Chg-P <u> 200</u> 200 City & State City & State 4. FEI Number Applied For 11-3649510 Not Applicable Boca Raton, Boca Raton, FI Country Country \$8.75 Additional 5. Certificate of Status Desired 33487 USA 33487 US# Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 City Zip Code FL 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be FILE NOW!!! FEE IS \$150,00 9. Election Campaign Financing In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Due by September 8, 2004 Added to Fees corporation did not receive the prior notice. 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 D TITLE D Delete TITLE Change Addition CROWLEY, DENNIS NAME NAME John R Harrington STREET ADDRESS 2200 CORPORATE BLVD STE 314 STREET ADDRESS 6001 Park of Commerce Blvd #200 CITY-ST-ZIP BOCA RATON, FL 33431 CITY-ST-ZIP Boca Raton, FL 33487 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Detete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TIPLE ☐ Defete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP 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 suppremental report is true and accurage 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 thus on propose to expect 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 outer like employees. changed, or on an attachment,

**FILED**