


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 28, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # P02000091699**

1. Entity Name  
RICHARDS & MARTIN, INC.



Principal Place of Business 1340 CHARLESTON SQUARE DRIVE # 204 NAPLES, FL 34110 US	Mailing Address 1340 CHARLESTON SQUARE DRIVE # 204 NAPLES, FL 34110 US
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**DO NOT WRITE IN THIS SPACE**



01242004 No Chg-P CR2E034 (10/03)

4. FEI Number 22-3866101	Applied For Not Applicable
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5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

RICHARDS, CHARLES R  
1340 CHARLESTON SQUARE DRIVE  
# 204  
NAPLES, FL 34110

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RICHARDS, CHARLES R 1340 CHARLESTON SQUARE DRIVE # 204 NAPLES, FL 34110
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MARTIN, STEVE 1340 CHARLESTON SQUARE DRIVE # 204 NAPLES, FL 34110
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECT RICHARDS, VICKI S 1340 CHARLESTON SQUARE DRIVE # 204 NAPLES, FL 34110
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRES RICHARDS, CHARLES R 1340 CHARLESTON SQUARE DRIVE # 204 NAPLES, FL 34110
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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01/29/04-80004-024 150.00

**DO NOT WRITE 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 like empowered.

SIGNATURE: Charles R. Richards 26 Jan 03 239-597-5308

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #