

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 30, 2004 8:00 am**  
**Secretary of State**

04-30-2004 90368 019 \*\*\*150.00

**DOCUMENT # P02000093680**

1. Entity Name

PRIORITY INVESTIGATIONS, INC.



Principal Place of Business

1543 U.S. HIGHWAY 98 SOUTH  
SUITE 212  
LAKELAND FL 33801-6551

Mailing Address

1543 U.S. HIGHWAY 98 SOUTH  
SUITE 212  
LAKELAND FL 33801-6551

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

73-1657731

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FRANKKENBURGER, JACK E  
1543 U.S. HIGHWAY 98 SOUTH  
SUITE 212  
LAKELAND FL 33801-6551

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☒ Delete  
NAME D'ALTO, MICHAEL  
STREET ADDRESS 1543 U.S. HIGHWAY 98 SOUTH STE #212  
CITY-ST-ZIP LAKELAND FL 33801-6551

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☒ Delete  
NAME DECKER, STEVE  
STREET ADDRESS 1543 U.S. HIGHWAY 98 SOUTH STE #212  
CITY-ST-ZIP LAKELAND FL 33801-6551

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME KNIGHT, DARRYL  
STREET ADDRESS 1543 U.S. HIGHWAY 98 SOUTH STE #212  
CITY-ST-ZIP LAKELAND FL 33801-6551

TITLE ☒ Change ☐ Addition  
NAME PRESIDENT  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

*Michael D'Alto*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-27-04 (863) 608-1082