

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000130600

FILED
Jan 17, 2004
Secretary of State

Entity Name: ROWE-JOHNSON MEDICAL-LEGAL CONSULTING FIRM, INC.

Current Principal Place of Business:

ROUTE 17, BOX 990
LAKE CITY, FL 32055

New Principal Place of Business:

Current Mailing Address:

ROUTE 17, BOX 990
LAKE CITY, FL 32055

New Mailing Address:

296 N.W. ROWE COURT
LAKE CITY, FL 32055

FEI Number: 68-0544671

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, SR., JERRY G
ROUTE 17, BOX 990
LAKE CITY, FL 32055

Name and Address of New Registered Agent:

JOHNSON, SR., JERRY G
296 N. W. ROWE COURT
LAKE CITY, FL 32055

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

01/17/2004

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: MR () Delete
Name: JOHNSON, JERRY G
Address: RT 17 BOX 990
City-St-Zip: LAKE CITY, FL 32055

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR (X) Change () Addition
Name: JOHNSON, JERRY G
Address: 296 N. W. ROWE COURT
City-St-Zip: LAKE CITY, FL 32055

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JERRY G. JOHNSON

Electronic Signature of Signing Officer or Director

MR.

01/17/2004

Date