

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000132084

FILED
Jan 06, 2004
Secretary of State

Entity Name: SANDRA W. BILGER, P.A.

Current Principal Place of Business:

605 BOWERS LANE
ST AUGUSTINE, FL 32080

New Principal Place of Business:

142 WHISPERING OAKS CIRCLE
ST AUGUSTINE, FL 32080

Current Mailing Address:

605 BOWERS LANE
ST AUGUSTINE, FL 32080

New Mailing Address:

142 WHISPERING OAKS CIRCLE
ST AUGUSTINE, FL 32080

FEI Number: 11-3668298

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BILGER, SANDRA W
605 BOWERS LANE
ST AUGUSTINE, FL 32080

Name and Address of New Registered Agent:

BILGER, SANDRA W
142 WHISPERING OAKS CIRCLE
ST AUGUSTINE, FL 32080

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: SANDRA W. BILGER

01/06/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: BILGER, SANDRA
Address: 605 BOWERS LANE
City-St-Zip: ST AUGUSTINE, FL 32080

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: BILGER, SANDRA
Address: 142 WHISPERING OAKS CIRCLE
City-St-Zip: ST AUGUSTINE, FL 32080

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: SANDRA W. BILGER

PSTD

01/06/2004

Electronic Signature of Signing Officer or Director

Date