

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 13, 2004 8:00 am
Secretary of State

02-13-2004 90010 040 ***150.00

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1. Entity Name

MOUSER & MOUSER, P.A.



Principal Place of Business

810 63RD AVENUE NORTH
ST. PETERSBURG FL 33702

Mailing Address

810 63RD AVENUE NORTH
ST. PETERSBURG FL 33702

54006061



MOORE

CR2E034 (11/03)

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

02-0671598

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MOUSER, FREDERICK L
810 63RD AVENUE NORTH
ST. PETERSBURG FL 33702

7. Name and Address of New Registered Agent

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

TITLE P,D ☐ Delete
NAME MOUSER, FREDERICK L
STREET ADDRESS 810 63RD AVENUE NORTH
CITY-ST-ZIP ST. PETERSBURG FL 33702

TITLE S,T ☒ Delete
NAME SCOTT, JENNIFER M
STREET ADDRESS 810 63RD AVENUE NORTH
CITY-ST-ZIP ST. PETERSBURG FL 33702

TITLE VP,D ☐ Delete
NAME MOUSER, JEAN N
STREET ADDRESS 810 63RD AVENUE NORTH
CITY-ST-ZIP ST. PETERSBURG FL 33702

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Secretary, Treasurer ☐ Change ☐ Addition
NAME Mouser, JEAN N
STREET ADDRESS 810 63RD AVE N
CITY-ST-ZIP ST. Petersburg, FL 33702

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

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

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/10/04 (727) 522-3070

Date

Daytime Phone #