

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000017324

FILED
Apr 15, 2004
Secretary of State

Entity Name: J G BARNES BOOKKEEPING & TAX SERVICES, INC.

Current Principal Place of Business:

P.O. BOX 1876
STUART, FL 34995 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1876
STUART, FL 34995 US

New Mailing Address:

FEI Number: 06-1679185

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARNES, JACONICA G
1032 SE 9TH ST
STUART, FL 34996 US

Name and Address of New Registered Agent:

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

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BARNES, JACONICA G
Address: P.O. BOX 1876
City-St-Zip: STUART, FL 34995 US

Title: SEC () Delete
Name: BARNES, JACONICA G
Address: P.O. BOX 1876
City-St-Zip: STUART, FL 34995 US

Title: TREA () Delete
Name: BARNES, JACONICA G
Address: P.O. BOX 1876
City-St-Zip: STUART, FL 34995 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JACONICA G BARNES

PRES

04/15/2004

Electronic Signature of Signing Officer or Director

Date