

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 11, 2004 8:00 am
Secretary of State

08-11-2004 90004 016 ***150.00

DOCUMENT # P03000027584

1. Entity Name
DAUGHERTY & ASSOCIATES, INC.



Principal Place of Business
**10100 WEST SAMPLE RD.
SUITE 318
CORAL SPRINGS, FL 33065**

Mailing Address
**10100 WEST SAMPLE RD.
SUITE 318
CORAL SPRINGS, FL 33065**

54067835

2. Principal Place of Business
5422 North Springs Way
Suite, Apt. #, etc.

3. Mailing Address
5422 North Springs Way
Suite, Apt. #, etc.



08092004 Chg-P CR2E034 (10/03)

City & State
CORAL Springs, FL

Zip
33076

Country
USA

4. FEI Number
81-0605590

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**DAUGHERTY, JOHN K
10100 WEST SAMPLE RD.
SUITE 318
CORAL SPRINGS, FL 33065**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)
5422 North Springs Way

City **CORAL Springs** FL Zip Code **33076**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN-11	
TITLE P	<input type="checkbox"/> Delete	TITLE Change	<input type="checkbox"/> Addition
NAME DAUGHERTY, JOHN K		NAME 5422 North Springs Way	
STREET ADDRESS 10100 WEST SAMPLE RD. SUITE 318		STREET ADDRESS CORAL Springs, FL 33076	
CITY-ST-ZIP CORAL SPRINGS, FL 33065		CITY-ST-ZIP CORAL Springs, FL 33076	
TITLE VP	<input type="checkbox"/> Delete	TITLE Change	<input type="checkbox"/> Addition
NAME DAUGHERTY, KAY F		NAME 5422 North Springs Way	
STREET ADDRESS 10100 WEST SAMPLE RD. SUITE 318		STREET ADDRESS CORAL Springs, FL 33076	
CITY-ST-ZIP CORAL SPRINGS, FL 33065		CITY-ST-ZIP CORAL Springs, FL 33076	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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]** **8/9/04 754-7416161**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR