

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000055824

FILED
Jul 07, 2004
Secretary of State

Entity Name: LEGAL MEDIATION PRACTICE, INC.

Current Principal Place of Business:

1919 BLANDING BLVD.
#19
JACKSONVILLE, FL 32210

New Principal Place of Business:

Current Mailing Address:

1919 BLANDING BLVD.
#19
JACKSONVILLE, FL 32210

New Mailing Address:

FEI Number: 20-0418737 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DUANE C. ROMANELLO, P.A.
1919-8 BLANDING BOULEVARD
JACKSONVILLE, FL 32277 US

Name and Address of New Registered Agent:

DUANE C. ROMANELLO, P.A.
1919-8 BLANDING BOULEVARD
JACKSONVILLE, FL 32210 US

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

07/07/2004

Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: CONNELLY, GLENN W
Address: 3950 MOSS OAK DR.
City-St-Zip: JACKSONVILLE, FL 32277

Title: VP () Delete
Name: PAIR, STEVEN C
Address: 9323 BEARSFORD CT.
City-St-Zip: JACKSONVILLE, FL 32244

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CONNELLY, RONDA S
Address: 3950 MOSS OAK DR.
City-St-Zip: JACKSONVILLE, FL 32277

Title: VP (X) Change () Addition
Name: PAIR, SUSAN R
Address: 9323 BEARSFORD CT.
City-St-Zip: JACKSONVILLE, FL 32244

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: RONDA CONNELLY

Electronic Signature of Signing Officer or Director

P

07/07/2004

Date