

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000061296

Entity Name: CONNIE HOLST, P.A.

FILED
Apr 30, 2004
Secretary of State

Current Principal Place of Business:

8660 COLLEGE PARKWAY
SUITE 80
FORT MYERS, FL 33919 US

New Principal Place of Business:

Current Mailing Address:

819 100TH AVENUE NORTH
NAPLES, FL 34108 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

HOLST, CONNIE
819 100TH AVENUE NORTH
NAPLES, FL 34108 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: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Change (X) Addition
Name: CONNIE, HOLST E PRES
Address: 819 100TH AVENUE NORTH
City-St-Zip: NAPLES, FL 34108 US

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: CONNIE HOLST

Electronic Signature of Signing Officer or Director

PRES

04/30/2004

Date