

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

DOCUMENT # P03000069375

1. Entity Name  
A MIKELL COMPANY INC.



**FILED  
Feb 10, 2004 8:00 am  
Secretary of State**

02-10-2004 90038 016 \*\*\*150.00

Principal Place of Business  
2221 ALDERNEY CT  
MIDDLEBURG, FL 32068

Mailing Address

2221 ALDERNEY CT  
MIDDLEBURG, FL 32068

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02072004 Chg-P CR2E034 (10/03)

4. FEI Number **2000 492 36**  Applied For  
 Not Applicable

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

**6. Name and Address of Current Registered Agent**

FLANAGAN, ANNETTE M  
5294 RAINY AVE N  
ORANGE PARK, FL 32065

Name **Lee Mikell**

Street Address (P.O. Box Number is Not Acceptable)  
**2221 Alderney Court**

City **Middleburg**

FL Zip Code **32068**

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: *Lee S. Mikell*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**2/06/04**

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

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

**10. OFFICERS AND DIRECTORS** **11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE **President**  
NAME **Lee Mikell**  
STREET ADDRESS **2221 Alderney Court**  
CITY-ST-ZIP **Middleburg FL 32068**

Delete

TITLE **President**  
NAME **Lee Mikell**  
STREET ADDRESS **2221 Alderney Court**  
CITY-ST-ZIP **Middleburg FL 32068**

Change  Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Delete

TITLE  
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STREET ADDRESS  
CITY-ST-ZIP

Change  Addition

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Change  Addition

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Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Change  Addition

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: *Lee S. Mikell*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2/06/04 904-514-1211**

Date

Daytime Phone #