

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 05, 2004 8:00 am**  
**Secretary of State**

05-05-2004 90251 026 \*\*\*150.00

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                      |                           |                                                                                                                                            |                                                                   |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|---------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|--|
| <b>DOCUMENT # P03000076169</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                      |                           |                                                                                                                                            |                                                                   |  |
| <b>1. Entity Name</b><br>GEORGE MORGAN, P.A.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                      |                           |                                                                                                                                            |                                                                   |  |
| <b>Principal Place of Business</b><br>9160 GULF BLVD.<br>ST. PETE BEACH, FL 33715                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                      |                           | <b>Mailing Address</b><br>9160 GULF BLVD.<br>ST. PETE BEACH, FL 33715    US                                                                |                                                                   |  |
| <b>2. Principal Place of Business</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                      | <b>3. Mailing Address</b> |                                                                                                                                            |                                                                   |  |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                      | Suite, Apt. #, etc.       |                                                                                                                                            |                                                                   |  |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                      | City & State              |                                                                                                                                            |                                                                   |  |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Country                                                              | Zip                       | Country                                                                                                                                    |                                                                   |  |
| <b>6. Name and Address of Current Registered Agent</b><br><br>MORGAN, GEORGE P<br>9160 GULF BLVD.<br>ST. PETE BEACH, FL 33715                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                      |                           | <b>7. Name and Address of New Registered Agent</b><br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br>FL    Zip Code |                                                                   |  |
| <b>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.</b>                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                      |                           |                                                                                                                                            |                                                                   |  |
| SIGNATURE _____<br><small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                      |                           |                                                                                                                                            |                                                                   |  |
| <b>FILE NOW!!! FEE IS \$150.00</b><br><b>After May 1, 2004 Fee will be \$550.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                      |                           | <b>9. Election Campaign Financing</b><br>Trust Fund Contribution: <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees              |                                                                   |  |
| <b>10. OFFICERS AND DIRECTORS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                      |                           | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>                                                                               |                                                                   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | P<br>MORGAN, GEORGE P<br>9160 GULF BLVD.<br>ST. PETE BEACH, FL 33715 |                           | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> Delete                                      |                           | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> Delete                                      |                           | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> Delete                                      |                           | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> Delete                                      |                           | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> Delete                                      |                           | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition |  |
| <b>12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.</b> |                                                                      |                           |                                                                                                                                            |                                                                   |  |
| <b>SIGNATURE:</b> <i>George Morgan</i> <b>4/29/04</b> <b>727-367-4582</b><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR    Date    Daytime Phone #</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                      |                           |                                                                                                                                            |                                                                   |  |