

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000087048

FILED
Jan 20, 2004
Secretary of State

Entity Name: STRATIGENT ADVISORS INCORPORATED

Current Principal Place of Business:

STRATIGENT ADVISORS
P.O. BOX 998061
MIAMI, FL 332998061

New Principal Place of Business:

Current Mailing Address:

STRATIGENT ADVISORS
P.O. BOX 998061
MIAMI, FL 332998061

New Mailing Address:

FEI Number: 57-1028321

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAYLORD, ROBERT C
2505 MONROE STREET
HOLLYWOOD, FL 33020 US

Name and Address of New Registered Agent:

GAYLORD, ROBERT C
1900 COOLIDGE STREET
HOLLYWOOD, FL 33020 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: ROBERT C. GAYLORD

01/20/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: GAYLOR, ROBERT C
Address: 2505 MONROE STREET
City-St-Zip: HOLLYWOOD, FL 33020

Title: COB () Delete
Name: GAYLOR, ROBERT C
Address: 2505 MONROE STREET
City-St-Zip: HOLLYWOOD, FL 33020

Title: PST () Delete
Name: LOCKIE, THOMAS R
Address: 6371 OLD MAHOGANY COURT
City-St-Zip: NAPLES, FL 34109

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: GAYLORD, ROBERT C
Address: 1900 COOLIDGE STREET
City-St-Zip: HOLLYWOOD, FL 33020

Title: COB (X) Change () Addition
Name: GAYLORD, ROBERT C
Address: 1900 COOLIDGE STREET
City-St-Zip: HOLLYWOOD, FL 33020

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: THOMAS R. LOCKIE

PST

01/20/2004

Electronic Signature of Signing Officer or Director

Date