

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000109035

FILED
Jan 06, 2004
Secretary of State

Entity Name: INDEPENDENT ALLIANCE, INC.

Current Principal Place of Business:

5359 PEMBRIDGE PLACE
TALLAHASSEE, FL 323176004

New Principal Place of Business:

5359 PEMBRIDGE PLACE
TALLAHASSEE, FL 32309

Current Mailing Address:

P.O. BOX 16044
TALLAHASSEE, FL 32317

New Mailing Address:

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

Name and Address of Current Registered Agent:

WYLIE, JR., F. JAMES
5359 PEMBRIDGE PLACE
TALLAHASSEE, FL 323176004

Name and Address of New Registered Agent:

WYLIE, JR., F. JAMES
5359 PEMBRIDGE PLACE
TALLAHASSEE, FL 32309

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:

01/06/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: KEAKINS, JOHN P
Address: 9395 SW 186TH TERRACE
City-St-Zip: DUNNELLON, FL 344329998

Title: DVPS () Delete
Name: WYLIE, JR., F. JAMES
Address: 5359 PEMBRIDGE PLACE
City-St-Zip: TALLAHASSEE, FL 323176004

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: DEAKINS, JOHN P
Address: 9395 SW 186TH TERRACE
City-St-Zip: DUNNELLON, FL 344329998

Title: DVPS (X) Change () Addition
Name: WYLIE, JR., F. JAMES
Address: 5359 PEMBRIDGE PLACE
City-St-Zip: TALLAHASSEE, FL 32309

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: F. JAMES WYLIE, JR

DVPS

01/06/2004

Electronic Signature of Signing Officer or Director

Date