

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 26, 2004 8:00 am**  
**Secretary of State**

04-14-2004 90069 027 \*\*\*150.00

<b>DOCUMENT # P03000122239</b>					
<b>1. Entity Name</b> SHELDON JONTIFF P.A.					
<b>Principal Place of Business</b> 5834 BAY HILL CIRCLE LAKE WORTH, FL 33463			<b>Mailing Address</b> 5834 BAY HILL CIRCLE LAKE WORTH, FL 33463		
<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Zip		Country	
<b>4. FEI Number</b> 20-0346710				<b>Applied For</b> <input type="checkbox"/> Not Applicable	
<b>5. Certificate of Status Desired</b>				<input type="checkbox"/> \$8.75 Additional Fee Required	
<b>6. Name and Address of Current Registered Agent</b> JONTIFF, SHELDON 5834 BAY HILL CIRCLE LAKE WORTH, FL 33463			<b>7. Name and Address of New Registered Agent</b>		
Name			Street Address (P.O. Box Number is Not Acceptable)		
City			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>					
<b>SIGNATURE</b> _____ (NOTE: Registered Agent signature required when reappointing) _____ <b>DATE</b> _____					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	P JONTIFF, SHELDON 5834 BAY HILL CIRCLE LAKE WORTH, FL 33463		<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	
Change Addition		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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<b>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.</b>					
<b>SIGNATURE:</b> <i>Sheldon Jontiff</i> <b>President</b> <i>4/26/04</i> <b>(813) 858-0110</b>					

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