## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## FILED May 03, 2004 8:00 am Secretary of State

DOCUMENT # P23371  1. Entity Name  J.F. DAY AND COMPANY, INC.								05-03-2004	4 90754 005	***150.	00	
Principal Place 2820 6TH AV BIRMINGHAM	/E SO		Mailing Address P.O. BOX 10368 BIRMINGHAM, AL 35202-7368			i	3 ( <b>3 m</b> ) ( <b>8 2</b> ) (1)	<b>.</b> 11 <b>788</b> 721 <b>78</b> 411M 1 <b>588</b> 1	raina nani notal nona	FIFII BIÊIF BEB	: <b>n</b> w	
2. Principal Place of Business			3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.				04282004	Chg-P	CR2E03	4 (10/03)		
City & State			City & State				4. FEI Numb 63-005				plied For t Applicable	
Zip	Zip Country		Zip	Zip Coun		5. Certificate of Status Desired						
	6. Name	and Address of Current	Registered Agent	ed Agent Name			7. Name and Address of New Registered Agent					
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324						Street Address (P.O. Box Number is Not Acceptable)						
1		•	A	City				FL	Zip Cod			
8. The above	named entit	y submits this statement for	or the purpose of changing	its register	ed office or	register	red agent, or bo	th, in the State of		miliar with,	and accept	
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE												
After May 1, 2004 Fee will be \$550.00  7 FILE NOW!!! FEE IS \$150.00  9. Election Campaign Financing \$5.0  Trust Fund Contribution.									~			
10.		OFFICERS AND		11,			ADDITIONS	CHANGES TO C				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DAY, III, 3 2820 6TH BIRMING	AVENUE SOUTH	☐ Delete			<u> </u>				Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	-	ROBERT B I AVENUE SOUTH HAM, AL	□ Delete							Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C BUNT, SU 2820 6TH	JSAN L	☐ Delete			34	crt, S	usan L		Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	l .	DAY J LAVE. SOUTH HAM, AL 35233	☐ Delete							☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Delete	1 1						☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	NAA STR	.E · Me EET ADDRESS Y-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 courage 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 empoyered to recur et his 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 liner like empowered.												