2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # P93000039221

1. Entity Name

LAW OFFICES JOHN R. COOK P.A.



FILED Mar 19, 2004 8:00 am Secretary of State

03-19-2004 90036 009 ***150.00

					COO VE TW				
Principal Plac	e of Business		Mailing Addres	5					
805 SW PARK ST			805 SW PARK	ST					
OKEECHOBEE FL 34972			OKEECHOBE	E FL 34972					
									HTTH II (TT)
2. Principal P	Place of Busines	SS .	3. Mailing Addre	ess	-				
								H. 1881 1889	
Suite, Apt. #, etc.			Suite, Apt. #,	etc.	MOORE CR2E034 (11/03)				
					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	OT ILLUGA	(1.770)		
City & State			City & State			4. FEI Number 65-042215	3		plied For
	7in Committee		<u> </u>	Zip Country					t Applicable
Zip		Country	Zip	Cour	ntry	5. Certificate of Status Desired		\$8.75 Add	
	6. Name a	nd Address of Curr	ent Registered Agent		1	7. Name and Address of New	Registered		
	-		om regioteles Agent		Name	T. Name and Address of Helf		- ··	
cod	OK, JOHN	R.		ļ					
202 N.W. 5TH AVENUE				Street Addr		(P.O. Box Number is Not Acceptab	ole)		
OKE	EECHOBEE	FL 34972							
							- • •		
					City		FL	Zip Cod	e
8. The above	named entity s	submits this statemen	nt for the purpose of ch	anging its register	red office or registe	red agent, or both, in the State of F	lorida. I am	familiar with,	and accept
	tions of register		, ,		_			·	
SIGNATURE .									
SIGNATURE.	Signature, typed or	printed name of registered a	gent and title if applicable.	(NOTE, Register	ed Agent signature require	d when reinstating)	DATE		
21/24 TF	II E NOWIII	FEE IS \$150.00							
		Fee will be \$550.	00			9. Election Campaign F			0 May Be
		Florida Departmer				Trust Fund Contribut	ion. L] Added	to Fees
≠ 0.	<u> </u>	OFFICERS A	ND DIRECTORS	11.		ADDITIONS/CHANGES TO OF	EIOCEO AND	DIBECTOR	7 10 1 4 4
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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.

SIGNATURE: <

JAMEN (W) JAYNE M
SPINATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

V/Pres 3/17/04