

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000072560

FILED  
Jan 15, 2004  
Secretary of State

Entity Name: SPENCER INTERNATIONAL ADVISORS, INC.

**Current Principal Place of Business:**

1401 S. FT. HARRISON AVE  
CLEARWATER, FL 33756 US

**New Principal Place of Business:**

**Current Mailing Address:**

1401 S. FT. HARRISON AVE  
CLEARWATER, FL 33756 US

**New Mailing Address:**

FEI Number: 59-3209241      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SPENCER, SCOTT A  
1401 S. FT. HARRISON AVE  
CLEARWATER, FL 33756 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SPENCER, SCOTT A  
Address: 45 ST. ANDREWS DRIVE  
City-St-Zip: BELLEAIR, FL 33756 US

Title: CD ( ) Delete  
Name: SPENCER, JAMES L  
Address: 4 BAY BROOK PLACE  
City-St-Zip: BELLEAIR, FL 33756 US

Title: VSD ( ) Delete  
Name: SPENCER, WENDY A  
Address: 45 ST. ANDREWS DRIVE  
City-St-Zip: BELLEAIR, FL 33756 US

Title: D ( ) Delete  
Name: SPENCER, STEPHEN J  
Address: 1215 S MYRTLE AVE  
City-St-Zip: CLEARWATER, FL 33756 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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: WENDY A. SPENCER

VSD

01/15/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date