

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000086646

FILED  
Mar 13, 2004  
Secretary of State

Entity Name: RONALD SCALISI ARCHITECTS, P.A.

## Current Principal Place of Business:

1309 N. ST. JOHNS BLUFF RD.  
A-5  
JACKSONVILLE, FL 32225 US

## Current Mailing Address:

1309 N. ST. JOHNS BLUFF RD.  
A-5  
JACKSONVILLE, FL 32225 US

FEI Number: 59-3216834

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

HAYES, DENNIS E  
2320 THE WOOD DR., WEST  
JACKSONVILLE, FL 32246 US

## New Principal Place of Business:

1309 ST. JOHNS BLUFF RD. N.  
A-5  
JACKSONVILLE, FL 32225 US

## New Mailing Address:

1309 ST. JOHNS BLUFF RD. N.  
A-5  
JACKSONVILLE, FL 32225 US

## Name and Address of New Registered Agent:

HAYES, DENNIS E  
2320 THE WOODS DR., WEST  
JACKSONVILLE, FL 32246 US

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:

03/13/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SCALISI, RONALD  
Address: 2332 COVINGTON CREEK DR. W.  
City-St-Zip: JACKSONVILLE, FL 32224

Title: ST ( ) Delete  
Name: SCALISI, EVELYN J  
Address: 2332 COVINGTON CREEK DR. W.  
City-St-Zip: JACKSONVILLE, FL 32224

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: SCALISI, RONALD L  
Address: 2332 COVINGTON CREEK DR. W.  
City-St-Zip: JACKSONVILLE, FL 32224

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: EVELYN J. SCALISI

ST

03/13/2004

Electronic Signature of Signing Officer or Director

Date