2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P94000001140

1. Entity Name
TROMBLEY & HANES, P.A.

Principal Place of Business	Mailing Address
707 NORTH FRANKLIN STREET 10TH FLOOR TAMPA, FL 33601	707 NORTH FRANKLIN STREET 10TH FLOOR TAMPA, FL 33601

DO NOT WRITE IN THIS SPACE

07222004   No Chg-P   CR2E034 (10/03)

4. FEI Number
59-3216127

Applied For
Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TROMBLEY, GARY R
707 NORTH FRANKLIN STREET
10TH FLOOR
TAMPA, FL 33601

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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 _Gary R Trombley_ President   GARY R. TROMBLEY

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10.   OFFICERS AND DIRECTORS

TITLE	P
NAME	TROMBLEY, GARY R
STREET ADDRESS	707 FRANKLIN STREET 10TH FLOOR
CITY-ST-ZIP	TAMPA, FL 33601
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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08/23/04--80005-024 150.00

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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.

SIGNATURE: _Gary R Trombley_   GARY R Trombley   President   8/20/04   813 229-7918

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #