


2004 FOR PROFIT CORPORATION ANNUAL REPORT

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

04-19-2004 90351 006 ***150.00

DOCUMENT # P94000003362	
1. Entity Name SUTTLE & ASSOCIATES, INC.	

Principal Place of Business 12390 SW 82 AVENUE MIAMI, FL 33156 US	Mailing Address 6640 SW 129TH TER MIAMI, FL 33156
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24048195

2. Principal Place of Business 312 N. Colonial Court	3. Mailing Address 312 N. Colonial Court
Suite, Apt. #, etc.	Suite, Apt. #, etc.



04152004 Chg-P CR2E034 (10/03)

City & State DeLand FL 32720	City & State DeLand, FL
Zip 32720	Country Volusia

4. FEI Number 65-0459422	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	
SUTTLE, STEPHEN D 6640 SW 129TH TER MIAMI, FL 33156	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	Zip Code

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: Stephen D. Suttle	DATE: 4-15-04

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 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SUTTLE, STEPHEN D 6640 SW 129TH TER MIAMI, FL 33156 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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.	
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SIGNATURE: Stephen D. Suttle	DATE: 4-15-04	DAYTIME PHONE: 386-774-2718
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #