2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # P94000008372

1. Entity Name

ANNÉ FETHERSTON, P.A.

Principal Place of Business

9900 W SAMPLE ROAD

SUITE 200

CORAL SPRINGS, FL 33065-4048 US

Mailing Address

9900 W SAMPLE ROAD

SUITE 200

CORAL SPRINGS, FL 33065-4048 US

FILED May 03, 2004 8:00 am Secretary of State

05-03-2004 91021 020 ***150.00



04202004

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-0464015

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

FETHERSTON, ANNE 6488 N W 103RD LA

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PARKLAN	D, FL 33076		in the second se	IN	THIS SPA	GE	
the obligati	named entity submits this statement for the plans of registered agent.	urpose of changing its register	red office or r	egistered agent, or bo	th, in the State of Florida	. I am familiar with, and	accept
SIGNATURE_	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Register	ed Agent signature	required when reinstating)		DATE	<u> </u>
. FILE NOTH FEE IS STOUCH (Election Campaign Fina Trust Fund Contribution		\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	OTORS		The state of the s			496) / V. F
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FETHERSTON, ANNE 6488 NW 103RD LA PARKLAND, FL 33076						
TITLE NAME							

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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:

STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP