

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000020046

FILED
Jan 12, 2004
Secretary of State

Entity Name: JAMES E. BEDSOLE, P.A..

Current Principal Place of Business:

7 OLD MISSIONA AVENUE
ST AUGUSTINE, FL 32084

New Principal Place of Business:

7 OLD MISSION AVENUE
ST AUGUSTINE, FL 32084

Current Mailing Address:

7 OLD MISSIONA AVENUE
SUITE B
ST AUGUSTINE, FL 32084

New Mailing Address:

7 OLD MISSION AVENUE
ST AUGUSTINE, FL 32084

FEI Number: 59-3231114

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEDSOLE, JAMES E
7 OLD MISSION AVENUE
ST AUGUSTINE, FL 32084

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: P () Delete
Name: BEDSOLE, JAMES E
Address: 7 OLD MISSION AVENUE
City-St-Zip: SAINT AUGUSTINE, FL 32084

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JAMES E. BEDSOLE

P

01/12/2004

_____ Electronic Signature of Signing Officer or Director

_____ Date