2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000046872

FILED Apr 02, 2004 Secretary of State

Entity Name: TAX, ACCOUNTING AND FINANCIAL ASSOCIATES, INC,

Current P	rincipal Pla	ce of Business:	New Principal Place	of Business:
868 106TH NAPLES,	HAVE. N. FL 34108	US		
Current N	lailing Addr	ess:	New Mailing Addres	s:
868 106TH NAPLES,	1 AVE. N. FL 34108	US		
FEI Number	: 65-0499493	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	l Address of	Current Registered Agent:	Name and Address	of New Registered Agent:
868 106TF	WANDERON HAVENUE N FL 34108			
,				
The above	e named entit e of Florida.	y submits this statement for th	e purpose of changing its registere	ed office or registered agent, or both,
The above	e of Florida.	y submits this statement for th	e purpose of changing its registere	ed office or registered agent, or both,
The above in the Stat	e of Florida. RE:	y submits this statement for th		ed office or registered agent, or both, Date
The above in the Stat SIGNATU	e of Florida. RE: Electr			
The above in the State SIGNATU	e of Florida. RE: Electr	onic Signature of Registered Aing Trust Fund Contribution().	Agent	
The above in the State SIGNATU	e of Florida. RE: Electr mpaign Financ S AND DIRE P WANDERON	onic Signature of Registered Aing Trust Fund Contribution (). CTORS: () Delete , THOMAS VENUE NORTH	Agent	Date
The above in the Status SIGNATU Election Ca OFFICER Title: Name: Address:	e of Florida. RE: Electr mpaign Financ S AND DIRE P WANDERON 868 106TH A NAPLES, FL DVP LAMB, JEFFI	onic Signature of Registered Aing Trust Fund Contribution (). CCTORS: () Delete , THOMAS VENUE NORTH 34108 () Delete REY BELL CIRCLE	Agent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS

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: THOMAS WANDERON P 04/02/2004