2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000083070

PO BOX 2578

JACKSONVILLE, FL 322032578

Address:

City-St-Zip:

FILED Feb 19, 2004 Secretary of State

Entity Name: FGB INVESTMENT SERVICES, INC.					
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
P O BOX 2 JACKSON	:578 VILLE, FL 32:	2032578			
Current Mailing Address:			New Mailing Address:		
P O BOX 2 JACKSON	:578 VILLE, FL 32:	2032578			
FEI Number:	59-3278499	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
PLATT, HARRY T III 760 RIVERSIDE AVE JACKSONVILLE, FL 32204 US			FANT, JULIAN E III P. O. BOX 2578 JACKSONVILLE, FL		
	named entity of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATURE: JULIAN E. FANT, III				02/19/2004	
Electronic Signature of Registered Agent			ent	Date	
Election Can	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	FANT, JULIAN P O BOX 2578		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	FANT, JULIAN P O BOX 2578		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PLATT, HARRY P O BOX 2578		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	D (X OLANDER, WI	i) Delete LLIAM	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: JULIAN E. FANT, III DIR 02/19/2004