2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2004 08:00 AM
Secretary of State

Ailito	AE KEPORI	4	
DOCUMENT # P940000 1. Entity Name G. PENFIELD JENNINGS, P.A.	90610		Secretary of Sta
Principal Place of Business 1960 BAYSHORE BLVD. DUNEDIN, FL 34698	Mailing Address 1960 BAYSHORE BLVD. DUNEDIN, FL 34698		
	E IN THIS SPA	CE	02122004 No Chg-P CR2E034 (10/03) 4. FEI Number
6. Name and Address of Cun JENNINGS, G P 1960 BAYSHORE BLVD. DUNEDIN, FL 34698	erit Hegistered Agent		DO NOT WRITE IN THIS SPACE
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 Signature, typed or pithed name of registered agent and title if explicable (NOTE, Registered Agent signature required when renstating). DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$5	50.00 Trust Fund Contribution.		.00 May Be ed to Fees
10. OFFICERS A INLE PSTD NAME JENNINGS, G P SIRLEL ADDRESS CITY-SI-ZIP DUNEDIN, FL 34698 UILE NAME SIRLEL ADDRESS	ND DIRECTORS		U00000077802 U3/08/U4-80002-013 150.00
CITY-S1-ZIP UILE NAME SIREEI ADDRESS CITY-S1-ZIP			DO NOT WRITE
TITLE NAME STREET ADDRESS CHY-S1-ZIP UTGE			IN THIS SPACE
NAME STREET ADURESS CITY - ST - ZIP			
HIRE MAME STREET ADDRESS CHY-S1-2IP			
12. I hereby certify that the information supplied with this fill 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 frue 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 of trustee empowered to 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 of trustee empowered to accurate 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: MAR 0 3 2004 (727) 733-3(9) SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR MAR 0 3 2004 (727) 733-3(9) Date Daylors Proper 8			