

2004 FOR PROFIT CORPORATION  
ANNUAL REPORT

FILED

Jan 12, 2004 08:00 AM  
Secretary of State

DOCUMENT # P95000010276

1. Entity Name  
RAYMOND D. MORRIS, INC.



Principal Place of Business  
6024 INDRIQ ROAD  
L-6  
FORT PIERCE, FL 34951 US

Mailing Address  
6024 INDRIQ ROAD  
L-6  
FORT PIERCE, FL 34951 US



01082004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number  
65-0552554  
Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MORRIS, RAYMOND D  
6024 INDRIQ ROAD  
#L-6  
FORT PIERCE, FL 34951

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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 RAYMOND D. MORRIS  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

7-JAN 04  
DATE

FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
PST  
MORRIS, RAYMOND D  
6024 INDRIQ ROAD UNIT L-6  
FORT PIERCE, FL 34951

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
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01/13/04-80022-015 150.00

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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: RAYMOND D. MORRIS JAN 04 772-465-4301  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #