


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

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

**DOCUMENT # P95000023695**

1. Entity Name  
**DONLEY & ASSOCIATES, INC.**



Principal Place of Business      Mailing Address

1955 WHISPERING FOREST TRAIL      1955 WHISPERING FOREST TRAIL  
CHULUOTA, FL 32766                      CHULUOTA, FL 32766

**DO NOT WRITE IN THIS SPACE**



03042004      No Chg-P      CR2E034 (10/03)

4. FEI Number      Applied For  
**59-3304714**      Not Applic

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

6. Name and Address of Current Registered Agent

**DONLEY, WILLIAM D**  
1955 WHISPERING FOREST TRAIL  
CHULUOTA, FL 32766

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      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	PD
NAME	DONLEY, WILLIAM D
STREET ADDRESS	1955 WHISPERING FOREST TRAIL
CITY - ST - ZIP	CHULUOTA, FL 32766
TITLE	S
NAME	DONLEY, MARNIE J.
STREET ADDRESS	1955 WHISPERING FOREST TRAIL
CITY - ST - ZIP	CHULUOTA, FL 32766
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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03/08/04-80131-017 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 changed, or on an attachment with an address, with all other like empowered.

*Marnie J. Donley*      **MARNIE J. DONLEY**      3/4/04      407 971-0897