2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2004
Secretary of State

DOCUMENT# P95000044175

Entity Name: AR-JO OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

6837 NE HWY 17
ARCADIA, FL 34266

New Principal Place of Business:

2731 NE HOLLINGSWORTH STREET
ARCADIA, FL 34266

Current Mailing Address:

6837 NE HWY 17
ARCADIA, FL 34266

New Mailing Address:

2731 NE HOLLINGSWORTH STREET
ARCADIA, FL 34266

FEI Number: 59-3316213 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DAVIS, JULIA A
6837 NE HWY 17
ARCADIA, FL 34266

Name and Address of New Registered Agent:

DAVIS-RUFER, JULIA
2731 NE HOLLINGSWORTH STREET
ARCADIA, FL 34266

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.

SIGNATURE: JULIA DAVIS-RUFER 03/24/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DVP ( ) Delete
Name: HARKLESS, DAVID L
Address: 6837 NE HWY 17
City-St-Zip: ARCADIA, FL 34266

Title: TS ( ) Delete
Name: DAVIS, JULIA A
Address: 6837 NE HWY 17
City-St-Zip: ARCADIA, FL 34266

Title: PS ( ) Delete
Name: DAVIS, JULIA A
Address: 6837 NE HWY 17
City-St-Zip: ARCADIA, FL 34266

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVP (X) Change ( ) Addition
Name: HARKLESS, DAVID L
Address: 1644 HANSEL ROAD
City-St-Zip: ARCADIA, FL 34266

Title: TS (X) Change ( ) Addition
Name: DAVIS, JULIA A
Address: 2731 NE HOLLINGSWORTH STREET
City-St-Zip: ARCADIA, FL 34266

Title: PS (X) Change ( ) Addition
Name: DAVIS, JULIA A
Address: 2731 NE HOLLINGSWORTH STREET
City-St-Zip: ARCADIA, FL 34266

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: JULIA DAVIS-RUFER PST 03/24/2004
Electronic Signature of Signing Officer or Director Date