

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000079294

FILED  
Jul 14, 2004  
Secretary of State

**Entity Name:** SECURITY INVESTMENTS PLUS, INC.

**Current Principal Place of Business:**

6 E. FOURTH STREET  
PANAMA CITY, FL 32401

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 880  
PANAMA CITY, FL 32402

**New Mailing Address:**

6 EAST 4TH STREET  
PANAMA CITY, FL 32401

**FEI Number:** 62-1620665

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DOKKEN, ROBERT S  
10 EAST 4TH ST  
PANAMA CITY, FL 32401

**Name and Address of New Registered Agent:**

DOKKEN, ROBERT S  
6 EAST 4TH ST  
PANAMA CITY, FL 32401

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:**

07/14/2004

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: DOKKEN, ROBERT S  
Address: 6 E 4TH ST  
City-St-Zip: PANAMA CITY, FL 32401

Title: VTS ( ) Delete  
Name: DOKKEN, MONICA B  
Address: 6 E 4TH ST  
City-St-Zip: PANAMA CITY, FL 32401

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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:** MONICA BRYAN DOKKEN

VTS

07/14/2004

Electronic Signature of Signing Officer or Director

Date