


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 06, 2004 08:00 AM
Secretary of State

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|---|---|
| DOCUMENT # P95000092728 1. Entity Name MARSHALL, BURKETT & ASSOCIATES, INC. |  |
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| Principal Place of Business 4355 HANCOCK BRIDGE PKWY. NORTH FT. MYERS, FL 33903 | Mailing Address 4355 HANCOCK BRIDGE PKWY. NORTH FT. MYERS, FL 33903 |
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02262004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

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| 4. FEI Number 65-0616208 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent BURKETT, WAYNE D 4355 HANCOCK BRIDGE PKWY. NORTH FT. MYERS, FL 33903 |
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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 _____

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D BURKETT, WAYNE D 2817 SW 31ST LANE CAPE CORAL, FL 33914 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D BURKETT, LEOTA R 2817 SW 31ST LANE CAPE CORAL, FL |
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| U00000080465 03/08/04-80109-018 150.00 DO NOT WRITE IN THIS SPACE |
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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.

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|---|-----------------------|---------------------|
| SIGNATURE: <u>Wayne D. Burkett</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | <u>3-4-04</u> Date | Daytime Phone # |
|---|-----------------------|---------------------|