


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 15, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P96000070127</b> 1. Entity Name <b>SANFORD COMMERCE CENTER, INC.</b>	
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Principal Place of Business <b>912 HIGHLAND AVE ORLANDO, FL 32803</b>	Mailing Address <b>PO BOX 1911 ORLANDO, FL 32802</b>
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02032004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-3397866</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

**6. Name and Address of Current Registered Agent**

**B&C CORPORATE SERVICES OF CENTRAL FLORIDA  
390 NORTH ORANGE AVENUE  
SUITE 1100  
ORLANDO, FL 32801**

**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 reinstalling) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

**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**

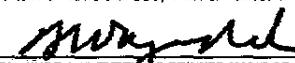
**000000087349  
03/15/04-80007-020 150.00**

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D RICH, A W 912 HIGHLAND AVE ORLANDO, FL</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D FUQUA, JEFFRY B 912 HIGHLAND AVE ORLANDO, FL 32803</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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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 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **A. WAYNE RICH** 2/5/04 407-649-4205