

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000075776

FILED
Apr 29, 2004
Secretary of State

Entity Name: CAREER CONCEPTS & ASSOCIATES, INC.

Current Principal Place of Business:

2114 NW 40 TERR
C-4
GAINESVILLE, FL 32605

New Principal Place of Business:

Current Mailing Address:

2114 NW 40 TERR
C-4
GAINESVILLE, FL 32605

New Mailing Address:

FEI Number: 59-3398060

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, WYNDOL
2114 NW 40TH TERRACE C-4
GAINESVILLE, FL 32606

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SMITH, WYNDOL
Address: 5202 SW 94TH STREET
City-St-Zip: GAINESVILLE, FL 32608

Title: S () Delete
Name: SMITH, WYNDOL
Address: 5202 SW 94TH STREET
City-St-Zip: GAINESVILLE, FL 32608

Title: T () Delete
Name: SMITH, WYNDOL
Address: 5202 SW 94TH STREET
City-St-Zip: GAINESVILLE, FL 32608

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SMITH, WYNDOL
Address: 11410 N E 205TH TERRACE C- 4
City-St-Zip: EARLETON, FL 32631

Title: S (X) Change () Addition
Name: SMITH, WYNDOL
Address: 11410 N E 205TH TERRACE C-4
City-St-Zip: EARLETON, FL 32631

Title: T (X) Change () Addition
Name: SMITH, WYNDOL
Address: 11410 N E 205TH TERRACE
City-St-Zip: EARLETON, FL 32631

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: WYNDOL SMITH

PRES

04/29/2004

Electronic Signature of Signing Officer or Director

Date