

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 08, 2004 8:00 am**  
**Secretary of State**

03-08-2004 90033 045 \*\*\*150.00

DOCUMENT # P96000081352

1. Entity Name  
SCOTT SIEGEL P.A., INC.



Principal Place of Business  
1711 MANDALAY DR  
TARPON SPRINGS, FL 34689

Mailing Address  
1711 MANDALAY DR  
TARPON SPRINGS, FL 34689

7

54015356



2. Principal Place of Business  
1713 Mandalay dr.  
Suite, Apt. #, etc.  
TARPON SPRINGS, FL  
City & State  
34689  
Zip  
Country  
USA

3. Mailing Address  
1713 Mandalay dr.  
Suite, Apt. #, etc.  
TARPON SPRINGS, FL  
City & State  
34689  
Zip  
Country  
USA

03042004 Chg-P CR2E034 (10/03)

4. FEI Number  
59-3401765  
Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

SIEGEL, SCOTT  
1711 MANDALAY DR  
TARPON SPRINGS, FL 34689

## 7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City  
FL Zip Code

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 \_\_\_\_\_

**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

## 10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	SIEGEL, SCOTT	
STREET ADDRESS	1711 MANDALAY DRIVE	
CITY-ST-ZIP	TARPON SPRINGS, FL 34689	
TITLE	S	<input type="checkbox"/> Delete
NAME	SIEGEL, ELAINE	
STREET ADDRESS	1711 MANDALAY DRIVE	
CITY-ST-ZIP	TARPON SPRINGS, FL 34689	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1713 Mandalay dr.	
STREET ADDRESS	TARPON SPRINGS, FL 34689	
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1713 Mandalay dr.	
STREET ADDRESS	TARPON SPRINGS, FL 34689	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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.

SIGNATURE: Scott Siegel, president 3/5/04  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

727-937-6000