

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 01, 2004 8:00 am**  
**Secretary of State**

04-01-2004 90012 040 \*\*\*158.75

**DOCUMENT # P96000089316**



1. Entity Name  
**HANNAH, ESTES & INGRAM, P.A.**

Principal Place of Business  
**37 N ORANGE AVE  
 STE300  
 ORLANDO, FL 32801-2439**

Mailing Address  
**P.O. BOX 4974  
 ORLANDO, FL 32802-4974**

**44023361**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01222004 Chg-P CR2E034 (10/03)

4. FEI Number

**59-3407579**

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HANNAH, ROBERT A  
 37 N ORANGE AVE  
 STE 300  
 ORLANDO, FL 32801**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

|  |  |                                 |
|--|--|---------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>HANNAH, ROBERT A<br>37 N ORANGE AVE., STE 300<br>ORLANDO, FL 328012439    | <input type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>INGRAM, J. CHARLES<br>37 N ORANGE AVE., STE 300<br>ORLANDO, FL 328012439  | <input type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>ESTES, MICHAEL A<br>37 N ORANGE AVE., STE 300<br>ORLANDO, FL 328012439    | <input type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | V<br>FOELS, CRAIG S<br>37 NORTH ORANGE AVE, SUITE 300<br>ORLANDO, FL 328012439 | <input type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | V<br>GIBBS, ERIC P<br>37 NORTH ORANGE AVE, SUITE 300<br>ORLANDO, FL 328012439  | <input type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  | <input type="checkbox"/> Delete |

|  |   |
|--|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition                     |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition                     |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition                     |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | See Attached Sheet <input type="checkbox"/> Change <input type="checkbox"/> Addition  |

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: Robert A. Hannah Robert A. Hannah 3/29/04 407-481-9449  
Signature and typed or printed name of signing officer or director Date Daytime Phone #

Attachment

2004 For Profit Corporation Annual Report  
Document #P96000089316  
Hannah, Estes & Ingram, P.A.

# P96000089316  
44023361

Officers and Directors - #10 and #11 continued

|                |                                |
|----------------|--------------------------------|
| Title          | V                              |
| Name           | Christopher C. Curry           |
| Street Address | 37 N. Orange Avenue, Suite 300 |
| City-St-Zip    | Orlando, FL 328012439          |
| Title          | V                              |
| Name           | Brian F. Moes ADDITION         |
| Street Address | 37 N. Orange Avenue, Suite 300 |
| City-St-Zip    | Orlando, FL 328012439          |
| Title          | V                              |
| Name           | Charles J. Meltz DELETE        |
| Street Address | 37 N. Orange Avenue, Suite 300 |
| City-St-Zip    | Orlando, FL 328012439          |

Charles J. Meltz is no longer employed by Hannah, Estes & Ingram, P. A. and should be removed from the listing of Officers and Directors.