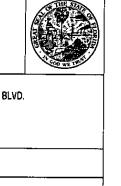
2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000090620

1. Entity Name

Principal Place of Business

DON MORGAN & ASSOCIATES, P.A.



FILED									
Jan 16, 2003 8:00 am									
Secretary of State									

01-16-2003 90119 035 ***150.00

Principal Place of Business 1500 ROYAL PALM SQUARE BLVD. SUITE 101 FORT MYERS FL 33919 US			Mailing Address 1500 ROYAL PALM SQUARE BLVD. SUITE 101 FORT MYERS FL 33919 US							
2. Principal Place of Business			3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			7	CHECK HERE IF MAKING CHANGES			
City & Sta	ate	Ci	City & State			4. FI	El Number 65-0703350	h	pplied For	
Zip	Coun	Country Zip Cour								
	6. Name and Ad	dress of Current Registe	red Agent	<u> </u>		7. N	ame and Address of New Registered	Agent		
					Name					
MORGAN	•				Street Address	(P.O. Bo	x Number is Not Acceptable)			
	YAL PALM SQUARE	BLVD., SUITE 101				(1.0.00	F.O. Box Number is Not Acceptable)			
FORT MY	ERS FL 33919									
					City		F	Zip Coc	le ·	
trie obliga	ations of registered age	s this statement for the pur ent.	pose of changing its	registere	ed office or registe	ered age	nt, or both, in the State of Florida. I an		and accept	
SIGNATURE		arne of registered agent and title if ap	colicable (NOTE	- Ponintoro	Agent signature require		-1-1	<u></u>	···	
		_ ·	CHOTE	:: negisteret	Agent signature require	id when rein	stating) DATE			
Afte	FILE NOW!!! FEE or May 1, 2003 Fee w k Payable to Florida						Election Campaign Financing Trust Fund Contribution.		May Be I to Fees	
10.		OFFICERS AND DIRECTO	ORS	11.		ADD	ITIONS/CHANGES TO OFFICERS AN	D DIRECTOR	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP*	PD MORGAN, DON E 1500 ROYAL PALI FORT MYERS FL	i square blvd., suit	□ Delete					☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD DOUGLAS, CAROI 1500 ROYAL PALM FORT MYERS FL-	A SQ BLVD STE 101	☐ Delete		T ADDRESS ST-ZIP	· *··	er og 1820 – Francisco en Francisco en 18	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	•	T ADDRESS ST-ZIP	· ·		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREE	I ADDRESS ST-ZIP .			Change	Addition	
TITLE NAME Street address City-St-Zip			□ Delete	NAME STREE	ADDRESS ST-ZIP	•		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	CITY-S				☐ Change	Addition	
moloutou	on this report of suppl	ion supplied with this filing lemental report is true and r or trustee empowered to	accurate and that m	v siunaiu	re snall have the s	same ieo	0.07(3)(i), Florida Statutes. I further cer al effect as if made under oath; that I	tify that the in	formation or director	

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: