

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000002922

FILED
Apr 29, 2004
Secretary of State

Entity Name: LANCASTER ASSOCIATES, INC.

Current Principal Place of Business:

1548 LANCASTER TERR
JACKSONVILLE, FL 32204 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 40749
JACKSONVILLE, FL 32203 US

New Mailing Address:

FEI Number: 59-3420050

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PURCELL, THOMAS K
1548 LANCASTER TERRACE
JACKSONVILLE, FL 32204 US

Name and Address of New Registered Agent:

FISHBURNE, III, JOHN I
1548 LANCASTER TERRACE
JACKSONVILLE, FL 32204 US

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: JOHN I FISHBURNE, III

04/29/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D (X) Delete
Name: PURCELL, THOMAS K
Address: 1548 LANCASTER TERRACE
City-St-Zip: JACKSONVILLE, FL 32204

Title: D () Delete
Name: FLANAGAN, TIMOTHY L
Address: 1548 LANCASTER TERRACE
City-St-Zip: JACKSONVILLE, FL 32204

Title: D () Delete
Name: HAY, JONATHAN L
Address: 1548 LANCASTER TERRACE
City-St-Zip: JACKSONVILLE, FL 32204

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JONATHAN L HAY

D

04/29/2004

Electronic Signature of Signing Officer or Director

Date