

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000004689

Entity Name: JOHN SPILLANE, C.P.A., P.A.

FILED  
Jan 25, 2004  
Secretary of State

**Current Principal Place of Business:**

12788 W.FOREST HILL BLVD.  
2005  
WELLINGTON, FL 33414

**New Principal Place of Business:**

**New Mailing Address:**

12788 W FOREST HILL BLVD.  
2005  
WELLINGTON, FL 33414

**Current Mailing Address:**

106 ORIOLE COURT  
ROYAL PALM BEACH, FL 33411

FEI Number: 65-0725487

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SPILLANE, JOHN  
12788 W.FOREST HILL BLVD.  
2005  
WELLINGTON, FL 33414

**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: PD ( ) Delete  
Name: SPILLANE, JOHN  
Address: 106 ORIOLE COURT  
City-St-Zip: ROYAL PALM BEACH, FL 33411

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: SPILLANE, JOHN P  
Address: 10401 OAK MEADOW LANE  
City-St-Zip: LAKE WORTH, FL 33467

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: JP SPILLANE

PRES

01/25/2004

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date