

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000019244

FILED
Feb 20, 2004
Secretary of State

Entity Name: ACCISE CORPORATION

Current Principal Place of Business:

1100 SOUTH THIRD ST
JACKSONVILLE BEACH, FL 32250 US

New Principal Place of Business:

152 SAINT GEORGE STREET
SAINT AUGUSTINE, FL 32084 US

Current Mailing Address:

PO BOX 49192
JACKSONVILLE BEACH, FL 32240 US

New Mailing Address:

PO BOX 3228
SAINT AUGUSTINE, FL 32085 US

FEI Number: 59-3428144

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GOLD, M
1100 SOUTH THIRD ST
JACKSONVILLE BEACH, FL 32250 US

Name and Address of New Registered Agent:

GOLD, M
152 SAINT GEORGE STREET
SAINT AUGUSTINE, FL 32084 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: M GOLD

02/20/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GOLD, M
Address: 1100 SOUTH THIRD ST
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GOLD, M
Address: 152 SAINT GEORGE STREET
City-St-Zip: SAINT AUGUSTINE, FL 32084 US

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: M GOLD

D

02/20/2004

Electronic Signature of Signing Officer or Director

Date