## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

## DOCUMENT # P97000047392

DEAN & ASSOCIATES OF BREVARD, INC.



**FILED** Mar 29, 2004 08:00 AM Secretary of State

Principal Place of Business

100 OYSTER PLACE ROCKLEDGE, FL 32955 US

100 OYSTER PLACE

Mailing Address

ROCKLEDGE, FL 32955 US



DO NOT WRITE IN THIS SPACE

03022004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3457507	 Applied For	
59-5457507	 Not Applicable	
5. Certificate of Status Desired	\$8.75 Additional Fee Required	

	6. Name and Address of Current Registered Ad
שעמוו	MATTHEM T CDA

503 N ORLANDO AVE STE 106 COCOA BEACH, FL 32931

SIGNATURE:

- DO NOT WRITE IN THIS SPACE

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631-7235

8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Signature, typed or printed iname of registered agent and little if applicable. (NOTE Registered Agent agreture required when reinstating)  DATE  FILE NOWITE FEE IS \$150.00  After May 1, 2004 Fee will be \$550.00  OFFICERS AND DIRECTORS  10. OFFICERS AND DIRECTORS  ITILE  DEAN, DARRELL R  100 OYSTER PLACE  100 OYSTER PLACE  100 OYSTER PLACE  ROCKLEDGE, FL 32955  UTV-ST-2P  STREET ADDRESS  CITY-ST-2P  TITLE  NAME  NAME  NAME  STREET ADDRESS  CITY-ST-2P  TITLE  NAME  STREET ADDRESS  CITY-ST-2P  TITLE  NAME  NAME  STREET AD			{			
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12. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f), 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 eath; 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.	of the cor	poration or the receiver or trustee empowered	d to execute this report as required to the clike empowered.	ed by Chapter 607, Florida Statut	est and mat my name appears in Block 10 of Block 11 if	