## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000054515

FILED Mar 07, 2004 Secretary of State

Entity Name: KIELY, JEREMIAH AND BARE	BERIS, P.A.
Current Principal Place of Business:	New Principal Place of Business:
5978 POWERS AVE JACKSONVILLE, FL 32217	
Current Mailing Address:	New Mailing Address:
5978 POWERS AVE JACKSONVILLE, FL 32217	
FEI Number: 59-3453810 FEI Number Applied I	For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)
Name and Address of Current Registered A	Agent: Name and Address of New Registered Agent:
JEREMIAH, CLIFFORD 5978 POWERS AVE JACKSONVILLE, FL 32217	
The above named entity submits this statemer in the State of Florida.	nt for the purpose of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Regis	stered Agent Date
Election Campaign Financing Trust Fund Contribution	on ( ).
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

Title: ( ) Delete Title: (X) Change ( ) Addition JEREMIAH, CLIFFORD JEREMIAH, CLIFFORD Name: Name: 5978 POWERS AVE 5978 POWERS AVE Address: Address: City-St-Zip: JACKSONVILLE, FL 32217 City-St-Zip: JACKSONVILLE, FL 32217 Title: () Delete Title: DR (X) Change ( ) Addition KIELY, ROBERT KIELY, ROBERT Name: Name: Address:

5978 POWERS AVE Address: 5978 POWERS AVE JACKSONVILLE, FL 32217 JACKSONVILLE, FL 32217 City-St-Zip: City-St-Zip:

Title: Title: ( ) Delete DR (X) Change ( ) Addition

BARBERIS, CARLOS R Name: BARBERIS, CARLOS R Name: Address: 1021 CESERY BLVD Address: 1021 CESERY BLVD City-St-Zip: JACKSONVILLE, FL 32211 City-St-Zip: JACKSONVILLE, FL 32211

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: CARLOS BARBERIS 03/07/2004 DR