

**2004 FOR PROFIT CORPORATION
1 ANNUAL REPORT**

DOCUMENT # P97000079525

1. Entity Name
PHILLIPS ACCURATE INVENTORY, INC



Principal Place of Business
878 BURNTLEAF LANE
TALLAHASSEE, FL 32310

Mailing Address
878 BURNTLEAF LANE
TALLAHASSEE, FL 32310

FILED
04 APR 30 AM 11 23
SECRETARY OF STATE
TALLAHASSEE, FL



04292004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3346100

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PHILLIPS, GWYN
878 BURNTLEAF LANE
TALLAHASSEE, FL 32310

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE P
NAME PHILLIPS, GWYN D
STREET ADDRESS 878 BURNTLEAF LANE
CITY-ST-ZIP TALLAHASSEE, FL 32310

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05/10/04--01004--003 **150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/30/04 850/894-9912

Gwyn Phillips