2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000095409

Entity Name: KEITH HOWARD & ASSOCIATES, P.A.

JACKSONVILLE, FL 32277

City-St-Zip:

FILED Apr 13, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 6261 WHISPERING OAKS DR. N. JACKSONVILLE, FL 32277 **Current Mailing Address: New Mailing Address:** 6261 WHISPERING OAKS DR. N. JACKSONVILLE, FL 32277 FEI Number: 59-3479207 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HEAD, KOKO 9309 ÓLD KINGS RD S. JACKSONVILLE, FL 32257 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition HOWARD, KEITH E Name: Name: 6261 WHISPERING OAKS DR N. Address: Address: City-St-Zip: JACKSONVILLE, FL 32277 City-St-Zip: () Delete Title: TS Title: () Change () Addition Name: HOWARD, DENA Name: 6261 WHISPERING OAKS DR N. Address: Address:

City-St-Zip:

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: KEITH E. HOWARD PRES 04/13/2004