2004 FOR PROFIT CORPORATION

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1. Entity Name	OCUMENT # P9800009701			FILED 04 APR 30 AM II: 26			
Principal Place 1500 BANNE TALLAHASSE	RMAN RD	Mailing Address 878 BURNT LEAF LANE TALLAHASSEE, FL 32310		A INGINES HE	SECRETA TALLAHA:	RY OF STA SEE, FLOK	
DO NOT WRITE IN THIS SPACE				04292004 4. FEI Numbe 59-3495	No Chg-P	CR2E034 (10/	Applied For Not Applicable Additional
	6. Name and Address of Current Ro GWYN T LEAF LANE SSEE, 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, 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.				.00 May Be ed to Fees			
10. TITLE NAME STREET ADDRESS GITY-ST-ZIP	OFFICERS AND D P PHILLIPS, GWYN 878 BURNT LEAF LANE TALLAHASSEE, FL 32310	IRECTORS		1 0 05/10	00035 /0401004	79017 002 **)	1 (50.00
TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE							
NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE IN THIS SPACE				
NAME Street Address City-St-Zip					11110 01	AOL	
name Street address City-St-Zip		;					
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
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 the 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 TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 1/29/04 850/894-99/2 Day SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DESCRIPTION DESCRIPTION OF DIRECTOR DESCRIPTION DESCRIPTION OF DIRECTOR DESCRIPTION DESCRIPTION OF DESCRIPTION OF DIRECTOR DESCRIPTION DESCRIPTION OF DIRECTOR DESCRIPTION DESCRIPTION OF DESCRIPTION DESCRIPTIO							
Gwyn PHILLIPS							