

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000041966

FILED
Jan 07, 2004
Secretary of State

Entity Name: HOPE CUDD, P.A.

Current Principal Place of Business:

440 S.W. LINDEN ST.
STUART, FL 34997

New Principal Place of Business:

Current Mailing Address:

440 S.W. LINDEN ST.
STUART, FL 34997

New Mailing Address:

FEI Number: 65-0835112

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUDD, HOPE L
440 S.W. LINDEN ST.
STUART, FL 34997 US

Name and Address of New Registered Agent:

CUDD, HOPE C
440 S.W. LINDEN ST.
STUART, FL 34997 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: HOPE C CUDD

01/07/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CUDD, HOPE L
Address: 440 S.W. LINDEN ST.
City-St-Zip: STUART, FL 34997

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CUDD, HOPE C
Address: 440 S.W. LINDEN ST.
City-St-Zip: STUART, FL 34997

Title: VP () Change (X) Addition
Name: CUDD, NICHOLAS S
Address: 440 SW LINDEN STREET
City-St-Zip: STUART, FL 34997 US

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: HOPE C CUDD

D

01/07/2004

Electronic Signature of Signing Officer or Director

Date