


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # P98000061937

1. Entity Name
FEDERAL PROCESSING ASSISTANCE ASSOCIATION, CORP.



Principal Place of Business Mailing Address

12501 SPRING HILL DRIVE 12501 SPRING HILL DRIVE
 SPRING HILL, FL 34609-5069 SPRING HILL, FL 34609-5069



04262004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3527060	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GOODIN, JAMES D.W.
 12501 SPRING HILL DRIVE
 BROOKSVILLE, FL 34609

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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 _____ (NOTE: Registered Agent signature required when reappointing) 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 NAME STREET ADDRESS CITY-ST-ZIP	VP GOODIN, LISA 17926 CALKINS CT SPRING HILL, FL 34610
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD GOODIN, JAMES D.W. 12501 SPRING HILL DRIVE SPRING HILL, FL 346095069
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 of the like empowered.

SIGNATURE: *[Handwritten Signature]* **JAMES D.W. Goodin President 4/28/04**
[Handwritten Signature] **LISA GOODIN VP 4/28/04 (352)684-3282**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #