

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000075020

FILED  
Sep 30, 2004  
Secretary of State

Entity Name: BARTRAM TRADING COMPANY

## Current Principal Place of Business:

13361 ATLANTIC BLVD.  
JACKSONVILLE, FL 32225

## New Principal Place of Business:

## Current Mailing Address:

% JOEL B. GILES, ESQUIRE  
P.O. BOX 2861  
JACKSONVILLE, FL 337312861

## New Mailing Address:

% JOEL B. GILES, ESQUIRE  
200 CENTRAL AVENUE, SUITE 2300  
ST. PETERSBURG, FL 33701

FEI Number: 59-3542605

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CFRA, LLC  
CORPORATE CENTER THREE AT INT'L PLAZA  
4221 W. BOY SCOUT BLVD, 10TH FLOOR  
TAMPA, FL 336075736 US

## Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: DODSON, J. THOMAS  
Address: 13361 ATLANTIC BLVD.  
City-St-Zip: JACKSONVILLE, FL 32225

Title: D ( ) Delete  
Name: BULLARD, FRED B JR.  
Address: 2325 ULMERTON ROAD SUITE 20  
City-St-Zip: CLEARWATER, FL 33762

Title: D ( ) Delete  
Name: MCNEEL, VAN L  
Address: 5401 WEST KENNEDY BLVD. SUITE 751  
City-St-Zip: TAMPA, FL 33609

Title: VPS ( ) Delete  
Name: MORRIS, GREFORY D  
Address: 2325 ULMERTON RD., SUITE 20  
City-St-Zip: CLEARWATER, FL 33762

Title: VTAS ( ) Delete  
Name: WOOD, RENE M  
Address: 5401 WEST KENNEDY BLVD., SUITE 751  
City-St-Zip: TAMPA, FL 33609

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
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: J. THOMAS DODSON

PRES

09/30/2004

Electronic Signature of Signing Officer or Director

Date