

2004 FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000075140

1. Entity Name
KERRY CRAIG FULLER P.A.



Principal Place of Business
55 ROGERS ST
#405
CLEARWATER, FL 33756

Mailing Address
55 ROGERS ST
#405
CLEARWATER, FL 33756

FILED

04 JAN -9 PM 1:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01052004 No Chg-P CR2E034 (10/03)

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4. FEI Number
59-3532327 Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent

FULLER, KERRY C
55 ROGERS STREET
#405
CLEARWATER, FL 33756

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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 reinstating) 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	P
NAME	FULLER, KERRY C
STREET ADDRESS	55 ROGERS ST #405
CITY-ST-ZIP	CLEARWATER, FL 33756
TITLE	VTS
NAME	FULLER, JO E
STREET ADDRESS	55 ROGERS ST #405
CITY-ST-ZIP	CLEARWATER, FL 33756
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/09/04--01035--007 **150.00

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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)(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 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 other like empowered.

SIGNATURE: JO E FULLER JO E FULLER 1/7/04 (727) 448-0309
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #