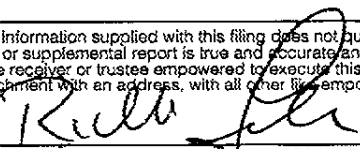


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 13, 2004 08:00 AM**  
**Secretary of State**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                            |                                                                                                                            |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <b>DOCUMENT # P99000000177</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                            |                                           |
| 1. Entity Name<br>COOPER, RIDGE & LANTINBERG, P.A.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                            |                                                                                                                            |
| Principal Place of Business<br>200 W FORSYTH STREET<br>SUITE 1200<br>JACKSONVILLE, FL 32202                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                            | Mailing Address<br>200 W FORSYTH STREET<br>SUITE 1200<br>JACKSONVILLE, FL 32202                                            |
| <b>DO NOT WRITE IN THIS SPACE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                            |                                                                                                                            |
| 01082004 No Chg-P CR2E034 (10/03)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                            |                                                                                                                            |
| 4. FEI Number<br>59-3557307                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                            | Applied For<br>Not Applicable                                                                                              |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                            | \$8.75 Additional<br>Fee Required                                                                                          |
| 6. Name and Address of Current Registered Agent<br><br>RIDGE, GEORGE E ESQ<br>200 W FORSYTH STREET<br>STE 1200<br>JACKSONVILLE, FL 32202                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                            | <b>DO NOT WRITE<br/>IN THIS SPACE</b>                                                                                      |
| 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 _____<br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                            |                                                                                                                            |
| <b>FILE NOW!!! FEE IS \$150.00<br/>After May 1, 2004 Fee will be \$550.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                            | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be<br/>Added to Fees</b> |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                            |                                                                                                                            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | PD<br>COOPER, WILLIAM G ESQ<br>200 W FORSYTH STREET STE 1200<br>JACKSONVILLE, FL 32202     | <div>UN00000003991<br/>01/14/04-80010-007 150.00</div><br><b>DO NOT WRITE<br/>IN THIS SPACE</b>                            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | DV<br>RIDGE, GEORGE E ESQ<br>200 W FORSYTH STREET STE 1200<br>JACKSONVILLE, FL 32202       |                                                                                                                            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | DV<br>LANTINBERG, RICHARD J ESQ<br>200 W FORSYTH STREET STE 1200<br>JACKSONVILLE, FL 32202 |                                                                                                                            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                            |                                                                                                                            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                            |                                                                                                                            |
| TITLE<br>NAME<br>STREET ADDRESS<br>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 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 filers empowered. |                                                                                            |                                                                                                                            |
| SIGNATURE: <br>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                            | Date: 1/12/04<br>Daytime Phone #: 353-6555                                                                                 |