

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000012925

Entity Name: ALTOM M. MAGLIO, P.A.

FILED  
Jan 06, 2004  
Secretary of State

**Current Principal Place of Business:**

2750 RINGLING BLVD  
SUITE 4  
SARASOTA, FL 34237

**New Principal Place of Business:**

**Current Mailing Address:**

2750 RINGLING BLVD  
SUITE 4  
SARASOTA, FL 34237

**New Mailing Address:**

FEI Number: 65-0896353      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MAGLIO, ALTOM M  
2750 RINGLING BLVD  
SUITE 4  
SARASOTA, FL 34237 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DPS ( ) Delete  
Name: MAGLIO, ALTOM M  
Address: 22 SOUTH TUTTLE AVE.,STE.4  
City-St-Zip: SARASOTA, FL 34237

Title: VPT ( ) Delete  
Name: MAGLIO, ALTOM M  
Address: 22 SOUTH TUTTLE AVE.,STE.4  
City-St-Zip: SARASOTA, FL 34237

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DPS (X) Change ( ) Addition  
Name: MAGLIO, ALTOM M  
Address: 2750 RINGLING BOULEVARD.,STE.4  
City-St-Zip: SARASOTA, FL 34237

Title: VPT (X) Change ( ) Addition  
Name: MAGLIO, ALTOM M  
Address: 2750 RINGLING BOULEVARD.,STE.4  
City-St-Zip: SARASOTA, FL 34237

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: ALTOM M. MAGLIO

DPS

01/06/2004

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date