## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000063248

Entity Name: D. G. O'DELL, INC.

FILED Jan 18, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

DAVID G. O"DELL, RN, BSN, LMT
1507 WILD IRIS LN.
ORANGE PARK, FL 32003

DAVID G. O'DELL, ARNP, LMT
1507 WILD IRIS LN.
ORANGE PARK, FL 32003

ORANGE PARK, FL 32003

Current Mailing Address: New Mailing Address:

DAVID G. O'DELL, RN, BSN, LMT
PO BOX 7156
ORANGE PARK, FL 32073

DAVID G. O'DELL, ARNP, LMT
PO BOX 7156
ORANGE PARK, FL 32073

FEI Number: 59-3588561 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

O'DELL, DAVID G 1507 WILD IRIS LN. ORANGE PARK, FL 32003

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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: () Change () Addition

 Name:
 O'DELL, DAVID G
 Name:

 Address:
 PO BOX 7156
 Address:

 City-St-Zip:
 ORANGE PARK, FL 32073
 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: DAVID G. O'DELL D 01/18/2004