## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000090480

Entity Name: LAW OFFICES OF THOMAS C. GANO, P.A.

FILED Jan 08, 2004 Secretary of State

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

400 EXECUTIVE CENTER DR STE 201 WEST PALM BEACH, FL 33401

Current Mailing Address: New Mailing Address:

14915 19TH ST. NORTH 802 S.E. PORTAGE AVE LOXAHATCHEE, FL 33470 PORT SAINT LUCIE, FL 34984 US

FEI Number: 65-0958371 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:

GANO, THOMAS C
14915 19TH ST. NORTH
LOXAHATCHEE, FL 33470 US
GANO, THOMAS C
802 S.E. PORTAGE AVE
PORT SAINT LUCIE, FL 34984 US

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: 01/08/2004

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: D (X) Change () Addition

 Name:
 GANO, THOMAS C
 Name:
 GANO, THOMAS C

 Address:
 14915 19TH ST. NORTH
 Address:
 802 SE PORTAGE AVENUE

 City-St-Zip:
 LOXAHATCHEE, FL 33470
 City-St-Zip:
 PORT SAINT LUCIE, FL 34984

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: THOMAS C. GANO D 01/08/2004