

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000099168

Entity Name: F & T, INC.

FILED  
Jan 31, 2004  
Secretary of State

**Current Principal Place of Business:**

1023 THOMASVILLE RD.  
TALLAHASSEE, FL 32312

**New Principal Place of Business:**

1023 THOMASVILLE RD.  
TALLAHASSEE, FL 32303

**Current Mailing Address:**

1023 THOMASVILLE RD.  
TALLAHASSEE, FL 32312

**New Mailing Address:**

1023 THOMASVILLE RD.  
TALLAHASSEE, FL 32303

FEI Number: 59-3608425

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TULLOS, CLAYTON  
1023 THOMASVILLE RD.  
TALLAHASSEE, FL 32312

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

TULLOS, CLAYTON  
1023 THOMASVILLE RD.  
TALLAHASSEE, FL 32303

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: FABIAN APARISI

01/31/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PM ( ) Delete  
Name: TULLOS, CLAYTON  
Address: 7113 UPLAND GLADES  
City-St-Zip: TALLAHASSEE, FL 32312

Title: VPTD ( ) Delete  
Name: APARISI, FABIAN  
Address: 263 B VILLAS CT S  
City-St-Zip: TALLAHASSEE, FL 32303

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: FABIAN APARISI

VP

01/31/2004

Electronic Signature of Signing Officer or Director

Date