## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Mar 12, 2004 08:00 AM Secretary of State **DOCUMENT # S03422** t. Entity Name WILLIE MAY JEFFRIES, P.A. Principal Place of Business Mailing Address 180 S BROADWAY 180 S BROADWAY BARTOW, FL 33830 BARTOW, FL 33830 01052004 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3033288 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent JEFFRIES, WILLIE MAY DO NOT WRITE 180 S BROADWAY BARTOW, FL 33830 IN THIS SPACE 5. 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOWIII FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 1000000087006 Trust Fund Contribution, Acced to Fees 03/12/04-80046-012 150.ND 10. TITLE NAME JEFFRIES, WILLIE MAY STREET ADDRESS 180 S BROADWAY CITY-ST-ZIP BARTOW, FL TITLE NAME STREET ADDRESS CITY - ST - ZIP TIBLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-719 TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE

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 charged, or on an attachment with an address, with all other like empowered.

SIGNATURE: 1

NAME STREET ADDRESS CRTY - ST - TRP

Caytime Phone #