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Daytime Phone #

ANNUAL REPORT				Apr 26, 2004 08:00 A		
DOCU	MENT # S09974		2010		Secre	etary of State
1. Entity Nam FRANK S	ne S. HUGHES, C.P.A., P.A.					
41 N. JEFFERSON ST. SUITE 211		lailing Address 11 N. JEFFERSON ST. SUITE 211 PENSACOLA, FL 32501				
E	OO NOT WRITE	01082004 No Chg-P CR2E034 (10/03)				
	6. Name and Address of Current R	egistered Agent				
41 N. JEF SUITE 21	, FRANK S., C.P.A. FERSON ST. 1 DLA, FL 32501	DO NOT WRITE IN THIS SPACE				
	a named entity submits this statement for titions of registered agent.	he purpose of changing its registe	red office or registe	red agent, or bo	oth, in the State of Florida.	I am familiar with, and accept
SIGNATURE.		d title if applicable. (NOTE Register	ed Agent signature requires	d when reinstating)	· · · · · · · · · · · · · · · · · · ·	DATE
	E NOW!!! FEE IS \$150.00 lay 1, 2004 Fee will be \$550.00	ncing \$5	.00 May Be led to Fees			
10.	OFFICERS AND D	IRECTORS			<u> </u>	· · · · · · · · · · · · · · · · · · ·
TALE NAME	D HUGHES, FRANK S., C.P.A.					
STREET ADDRESS	1					
CITY-ST-ZIP	PENSACOLA, FL				U0000013	1220
NAME					04/26/04-80	145-024 150.00
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CITY-SI-ZIP			-			
NAME				IN	THIS SPA	CE
STREET ADDRESS CITY-ST-ZIP						
MIE MIE			-			
HAME						
STREET ADDRESS						
CHY-SI-ZIP		·	-			
NAME			1			

STRLET ADDRESS CITY-ST-ZIP

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 changed, or on an attachment with an address, with all other like empowered. SIGNATURE: