


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 08, 2004 08:00 AM
Secretary of State

DOCUMENT # S21977 1. Entity Name FISCHER MANAGEMENT ASSOCIATES, INC.		
Principal Place of Business 118 REGENTS PLACE PONTE VEDRA BEACH, FL 32082 US		Mailing Address 118 REGENTS PLACE PONTE VEDRA BEACH, FL 32082 US
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent FISCHER, JOHN A. 118 REGENTS PLACE PONTE VEDRA BEACH, FL 32082		DO NOT WRITE IN THIS SPACE
8. 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: <u><i>P. H. Fischer</i></u> (NOTE: Registered Agent signature required when reinstating) DATE: <u>7/04/04</u>		
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FISCHER, JOHN A 118 REGENTS PLACE PONTE VEDRA BCH, FL 32082	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V HAMMOND-FISCHER, P 118 REGENTS PLACE PONTE VEDRA BEACH, FL 32082	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET 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: <u><i>P. H. Fischer</i></u> <u>7/4/04</u> <u>904-280-3563</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #		



07042004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3034175	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

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07/08/04-80016-011 150.00

**DO NOT WRITE
IN THIS SPACE**