

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S98333

FILED  
Jan 26, 2004  
Secretary of State

**Entity Name:** LAW OFFICES OF MARTIN B. DONOHOE, P.A.

**Current Principal Place of Business:**

205 E CENTRAL BLVD  
STE 500  
ORLANDO, FL 328011980 US

**New Principal Place of Business:**

**Current Mailing Address:**

205 E CENTRAL BLVD  
STE 500  
ORLANDO, FL 328011980 US

**New Mailing Address:**

**FEI Number:** 59-3096109

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DONOHOE, MARTIN B. ESQUIRE  
205 E CENTRAL BLVD STE 500  
ORLANDO, FL 328011980 US

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

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** D ( ) Delete  
**Name:** DONOHOE, MARTIN B ESQ  
**Address:** 205 E CENTRAL BLVD STE 500  
**City-St-Zip:** ORLANDO, FL 328011980

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

**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:** MARTIN B. DONOHOE, ESQ.

D

01/26/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date