

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 29, 2004 8:00 am**  
**Secretary of State**

03-29-2004 90034 010 \*\*\*150.00

**DOCUMENT # V29719**

1. Entity Name  
**J. BENNETT GROCOCK, P.A.**



Principal Place of Business  
**455 S ORANGE AVE  
STE 500  
ORLANDO, FL 32801 US**

Mailing Address  
**455 S ORANGE AVE  
STE 500  
ORLANDO, FL 32801 US**

**54023791**

2. Principal Place of Business  
**255 S. Orange Avenue**

3. Mailing Address  
**255 S. Orange Avenue**

Suite, Apt. #, etc.  
**Suite 1201**

Suite, Apt. #, etc.  
**Suite 1201**

03032004 Chg-P CR2E034 (10/03)

City & State  
**Orlando, Florida**

City & State  
**Orlando, Florida**

4. FEI Number  
**59-3119597**

Applied For  
Not Applicable

Zip  
**32801**

Country  
**US**

Zip  
**32801**

Country  
**US**

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**GROCOCK, J. BENNETT  
455 S ORANGE AVEN  
500  
ORLANDO, FL 32801**

**7. Name and Address of New Registered Agent**

Name  
**Grocock, J. Bennett**  
Street Address (P.O. Box Number is Not Acceptable)  
**255 S. Orange Avenue  
Suite 1201**  
City  
**Orlando** **FL** Zip Code  
**32801**

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: **J. Bennett Grocock** **3/25/04**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
GROCOCK, J. BENNETT  
455 S ORANGE AVE  
ORLANDO, FL 32801** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
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STREET ADDRESS  
CITY-ST-ZIP  
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CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
Grocock, J. Bennett  
255 S. Orange Ave., Ste 1201  
Orlando, FL 32801** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

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 files empowered.

SIGNATURE: **J. Bennett Grocock** **3/25/04** **407-835-1234**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #