

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V51802

FILED
Mar 22, 2004
Secretary of State

Entity Name: LADS COMPANY OF NORTH FLORIDA, INC.

Current Principal Place of Business:

DBA NORRIS PHARMACY
110 SOUTH RANGE STREET
MADISON, FL 32340

New Principal Place of Business:

Current Mailing Address:

PO BOX 509
MADISON, FL 32341 US

New Mailing Address:

FEI Number: 59-3133519

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NORRIS, CHARLES L
5061 NW LITTLE CAT RD
MADISON, FL 32340 US

Name and Address of New Registered Agent:

NORRIS, DEBBIE P COOWNER
5061 NW LITTLE CAT RD
MADISON, FL 32340 US

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: DEBBIE PEACOCK NORRIS & CHARLES LEE NORRIS

03/22/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: NORRIS, DEBBIE P
Address: 5061 NW LITTLE CAT RD
City-St-Zip: MADISON, FL 32340

Title: VP () Delete
Name: NORRIS, CHARLES L.
Address: 5061 NW LITTLE CAT RD
City-St-Zip: MADISON, FL 32340

Title: T () Delete
Name: NORRIS, DEBBIE
Address: 5061 NW LITTLE CAT RD
City-St-Zip: MADISON, FL 32340

Title: S () Delete
Name: NORRIS, CHARLES L.
Address: 5061 NW LITTLE CAT RD
City-St-Zip: MADISON, FL 32340

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DEBBIE PEACOCK NORRIS

PRES

03/22/2004

Electronic Signature of Signing Officer or Director

Date