

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 838458

FILED
Mar 22, 2004
Secretary of State

Entity Name: MARSHALL AND STEVENS INCORPORATED

Current Principal Place of Business:

707 WILSHIRE BLVD
LOS ANGELES, CA 90017 US

New Principal Place of Business:

Current Mailing Address:

707 WILSHIRE BLVD
SUITE 5200
LOS ANGELES, CA 90017 US

New Mailing Address:

FEI Number: 36-2919252 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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: PCEO () Delete
Name: SANTARSIERO, M W
Address: 707 WILSHIRE BLVD 5200
City-St-Zip: LOS ANGELES, CA 90017 US

Title: EVPD () Delete
Name: ATKINS, MERLE
Address: 1700 MARKET STR #1510
City-St-Zip: PHILADELPHIA, PA 19103

Title: COBD () Delete
Name: KERSLAKE, R
Address: 707 WILSHIRE BLVD SUITE 5200
City-St-Zip: LOS ANGELES, CA 90017

Title: EVPD () Delete
Name: THOMAS, FRED
Address: 707 WILSHIRE BLVD 5200
City-St-Zip: LOS ANGELES, CA 90017

Title: EVP () Delete
Name: SPUDE, JOHN
Address: 1101 E TOUHY AVE S 400
City-St-Zip: DES PLAINES, IL 60018

Title: VCFO () Delete
Name: CRAIG, PAUL
Address: 707 WILSHIRE BLVD S 5200
City-St-Zip: LOS ANGELES, CA 90017 US

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:

Title: EVPD (X) Change () Addition
Name: SPUDE, JOHN
Address: 1101 E TOUHY AVE S 400
City-St-Zip: DES PLAINES, IL 60018

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: PAUL CRAIG

VCFO

03/22/2004

Electronic Signature of Signing Officer or Director

_____ Date