

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000001834

FILED
Apr 06, 2004
Secretary of State

Entity Name: SCHOELLER WAVIN SYSTEMS, INC.

Current Principal Place of Business:

5401 WEST KENNEDY STREET, SUITE 711
TAMPA, FL 33609

New Principal Place of Business:

Current Mailing Address:

P.O BOX 13052
TAMPA, FL 33681

New Mailing Address:

FEI Number: 59-3634227

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANDERS, NANCY J
5401 WEST KENNEDY STREET, SUITE 711
TAMPA, FL 33609 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: S () Delete
Name: SANDERS, NANCY J
Address: 5401 WEST KENNEDY STREET, SUITE 711
City-St-Zip: TAMPA, FL 33609

Title: D () Delete
Name: WOLFKAMP, RENE
Address: 5401 WEST KENNEDY STREET, SUITE 711
City-St-Zip: TAMPA, FL 33609

Title: P () Delete
Name: DE BOLEX, ERIK
Address: 5401 WEST KENNEDY STREET, SUITE 711
City-St-Zip: TAMPA, FL 33609

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:

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: NANCY J. SANDERS

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04/06/2004

Electronic Signature of Signing Officer or Director

_____ Date