

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H41017

FILED
Jan 28, 2004
Secretary of State

Entity Name: MASSEY SERVICES, INC.

Current Principal Place of Business:

610 N WYMORE RD
MAITLAND, FL 32751 US

New Principal Place of Business:

Current Mailing Address:

610 N WYMORE RD
MAITLAND, FL 32751 US

New Mailing Address:

FEI Number: 59-2557150 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HATCHER, STEPHEN B.
315 EAST ROBINSON STREET
SUITE 600
ORLANDO, FL 32801

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: PTD () Delete
Name: MASSEY, HARVEY L.,
Address: 1550 VIA TUSCANY
City-St-Zip: WINTER PARK, FL

Title: EVP () Delete
Name: MASSEY, ANTHONY L
Address: 115 LAMORAK LANE
City-St-Zip: MAITLAND, FL 32751

Title: VPCS () Delete
Name: BARBARA A. CORINO,
Address: 417 RUTH ST.
City-St-Zip: LONGWOOD, FL

Title: EVP () Delete
Name: RICK BEARD,
Address: 1861 N. PRAIRIE DUNES CT.
City-St-Zip: OVIEDO, FL

Title: VPDQ () Delete
Name: JONES, ADAM
Address: 30 DALEWOOD DR
City-St-Zip: ORLANDO, FL 32808

Title: () Delete
Name:
Address:
City-St-Zip:

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

Title: CFO () Change (X) Addition
Name: HORTON, JEFFREY S MR.
Address: 201 N. SWEETWATER COVE BLVD.
City-St-Zip: LONGWOOD, FL 32779

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: BARBARA A. CORINO

SEC

01/28/2004

Electronic Signature of Signing Officer or Director

_____ Date