

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000039913

FILED
Jan 16, 2004
Secretary of State

Entity Name: SELECT PARTNERS, INC.

Current Principal Place of Business:

1803 EAST BROADWAY
OVIEDO, FL 32765

New Principal Place of Business:

Current Mailing Address:

1803 EAST BROADWAY
OVIEDO, FL 32765

New Mailing Address:

FEI Number: 59-3640910

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BALANOFF, GARY
8202 MARGARITA DRIVE
ORLANDO, FL 32812 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: D () Delete
Name: BALANOFF, GARY
Address: 8202 MARGARITA DRIVE
City-St-Zip: ORLANDO, FL 32812

Title: TD () Delete
Name: JORDAN, BETH
Address: 7 CARDINAL DR
City-St-Zip: LONGWOOD, FL 32779

Title: P () Delete
Name: BALANOFF, GARY
Address: 8202 MARGARITA DR.
City-St-Zip: ORLANDO, FL 32807

Title: D () Delete
Name: FISHER, JANICE
Address: 904 AULSTA NATIONAL BLVD.
City-St-Zip: WINTER SPRINGS, FL 32708

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: D (X) Change () Addition
Name: FISHER, JANICE
Address: 904 AUGUSTA NATIONAL BLVD.
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D () Change (X) Addition
Name: MCCULLOCH, BRAD A
Address: 361 RED MULBERRY CT
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: GARY BALANOFF

P

01/16/2004

Electronic Signature of Signing Officer or Director

_____ Date