

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000030596

FILED
Jan 31, 2004
Secretary of State

Entity Name: THE TRACZYK COMPANY

Current Principal Place of Business:

10333 ASHLEY OAKS DR.
RIVERVIEW, FL 33569

New Principal Place of Business:

Current Mailing Address:

10333 ASHLEY OAKS DR.
RIVERVIEW, FL 33569

New Mailing Address:

FEI Number: 56-2330288

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRACZYK, ROXANNE J
10333 ASHLEY OAKS DR.
RIVERVIEW, FL 33569

Name and Address of New Registered Agent:

TRACZYK, STEVEN M
10333 ASHLEY OAKS DR.
RIVERVIEW, FL 33569

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: STEVEN M. TRACZYK

01/31/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: TRACZYK, ROXANE J
Address: 10333 ASHLEY OAKS DR.
City-St-Zip: RIVERVIEW, FL 33569

Title: VD () Delete
Name: TRACZYK, STEVEN M
Address: 10333 ASHLEY OAKS DR.
City-St-Zip: RIVERVIEW, FL 33569

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: TRACZYK, STEVEN M
Address: 10333 ASHLEY OAKS DR.
City-St-Zip: RIVERVIEW, FL 33569

Title: VD (X) Change () Addition
Name: TRACZYK, ROXANE J
Address: 10333 ASHLEY OAKS DR.
City-St-Zip: RIVERVIEW, FL 33569

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: STEVEN M. TRACZYK

PD

01/31/2004

Electronic Signature of Signing Officer or Director

Date