2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004
Secretary of State

DOCUMENT# P96000071417

Entity Name: COOPER MANAGEMENT SERVICES, INC.

Current Principal Place of Business:

1791 PALM ACRES DR
WEST PALM BEACH, FL 33406

New Principal Place of Business:

1795 FOREST HILL BLVD
STE B
WEST PALM BEACH, FL 33406

Current Mailing Address:

1791 PALM ACRES DR
WEST PALM BEACH, FL 33406

New Mailing Address:

1795 FOREST HILL BLVD
STE B
WEST PALM BEACH, FL 33406

FEI Number: 65-0698896 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COOPER, KATHLEEN A
1791 PALM ACRES DR
WEST PALM BEACH, FL 33406 US

Name and Address of New Registered Agent:

COOPER, KATHLEEN A
1795 FOREST HILL BLVD
STE B
WEST PALM BEACH, FL 33406 US

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: KATHLEEN A COOPER 04/26/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: COOPER, KATHLEEN A
Address: 445 SANTA ANNA DRIVE
City-St-Zip: PALM SPRINGS, FL 33461

Title: V ( ) Delete
Name: COOPER, C.R.
Address: 445 SANTA ANNA DR
City-St-Zip: PALM SPRINGS, FL 33461

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,D (X) Change ( ) Addition
Name: COOPER, KATHLEEN A
Address: 445 SANTA ANNA DRIVE
City-St-Zip: PALM SPRINGS, FL 33461

Title: V,D (X) Change ( ) Addition
Name: COOPER, C.R.
Address: 445 SANTA ANNA DR
City-St-Zip: PALM SPRINGS, FL 33461

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: CLARENCE R COOPER VP 04/26/2004
Electronic Signature of Signing Officer or Director Date