

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000022792

FILED  
Apr 06, 2004  
Secretary of State

Entity Name: CARDINAL, CARLSON + PARTNERS, INC.

## Current Principal Place of Business:

330 S PINEAPPLE BLVD  
204  
SARASOTA, FL 342363423 US

## New Principal Place of Business:

741 SOUTH ORANGE AVENUE  
SARASOTA, FL 34236 US

## Current Mailing Address:

330 S PINEAPPLE BLVD  
204  
SARASOTA, FL 342363423 US

## New Mailing Address:

741 SOUTH ORANGE AVENUE  
SARASOTA, FL 34236 US

FEI Number: 65-0740200

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CARLSON, MICHAEL  
330 S PINEAPPLE AVE  
204  
SARASOTA, FL 34236 US

## Name and Address of New Registered Agent:

CARLSON, MICHAEL  
741 SOUTH ORANGE AVENUE  
SARASOTA, FL 34236 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:

04/06/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: CARDINAL, THOMAS J  
Address: 2205 ARLINGTON ST  
City-St-Zip: SARASOTA, FL 34239

Title: STD (X) Delete  
Name: CARLSON, MICHAEL R  
Address: 3182 HATTON STREET  
City-St-Zip: SARASOTA, FL 34237

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: CARLSON, MICHAEL R  
Address: 2340 TALL OAK COURT  
City-St-Zip: SARASOTA, FL 34232

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: MICHAEL R. CARLSON

PD

04/06/2004

Electronic Signature of Signing Officer or Director

Date