## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000025407

FILED Apr 26, 2004 Secretary of State

| DOCUMENT# F30  | 300023407                       |                                    | Secretary of State                        |  |
|--|---------------------------------|------------------------------------|---|--|
| Entity Name: CABANA  | MANAGEMENT GROUP, INC           | ).                                 |   |  |
| Current Principal Place of Business:                       |                                 | New Principal Place o              | of Business:                              |  |
| 1005 N 12TH AVE<br>PENSACOLA, FL 32501                     |                                 |                                    |   |  |
| Current Mailing Address:                                   |                                 | New Mailing Address:               |   |  |
| 1005 N 12TH AVE<br>PENSACOLA, FL 32501                     |                                 |                                    |   |  |
| FEI Number: 59-3496625                                     | FEI Number Applied For ( )      | FEI Number Not Applicable ( )      | Certificate of Status Desired ( )         |  |
| Name and Address of C                                      | urrent Registered Agent:        | Name and Address of                | Name and Address of New Registered Agent: |  |
| MCALPIN, BRUCE E<br>1005 N 12TH AVE<br>PENSACOLA, FL 32501 | US                              |                                    |   |  |
| The above named entity s<br>in the State of Florida.       | ubmits this statement for the p | ourpose of changing its registered | office or registered agent, or both,      |  |
| SIGNATURE:   |                                 |                                    |   |  |
| Electronic Signature of Registered Agen                    |                                 | ent                                | Date                                      |  |
| Election Campaign Financing                                | Trust Fund Contribution ( ).    |                                    |   |  |
| OFFICERS AND DIRECTORS:                                    |                                 | ADDITIONS/CHANGE                   | S TO OFFICERS AND DIRECTORS               |  |
|  |                                 |                                    |   |  |

Title: ( ) Delete Title: PSTD (X) Change ( ) Addition MCALPIN, FRED MCALPIN, BRUCE E Name: Name: 1704 OSCEOLA BLVD. Address: 1704 OSCEOLA BLVD. Address: City-St-Zip: PENSACOLA, FL 32503 City-St-Zip: PENSACOLA, FL 32503 Title: (X) Delete Title: () Change () Addition MCALPIN, BRUCE Name: Name: Address: 900 EAST MORENO ST. Address:

City-St-Zip: PENSACOLA, FL 32503 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: BRUCE E MCALPIN OD 04/26/2004