

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90223 024 ***150.00

DOCUMENT # P99000108833					
1. Entity Name HUMAN CAPITAL MANAGEMENT, INC					
Principal Place of Business 1000 WEST MCNAB ROAD POMPANO BEACH, FL 33069			Mailing Address 1000 WEST MCNAB ROAD POMPANO BEACH, FL 33069		
2. Principal Place of Business 1000 West McNab Road		3. Mailing Address			
Suite, Apt. #, etc. Suite 150		Suite, Apt. #, etc.			
City & State Pompano Beach, FL		City & State		4. FEI Number 65-0970567	
Zip 33069		Country USA		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GUNN, J. SCOTT 100 SE 3RD AVENUE SUITE 2500 FORT LAUDERDALE, FL 33004			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$350.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD CAPI, KARY A 1000 WEST MCNAB ROAD STE. 150 POMPANO BEACH, FL 33069	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/C CEO Kary A. Capi-Gunn 1000 W McNab Road, Ste 150 Pompano Beach, FL 33069	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/VP C. Leo Smith 1000 West McNab Road Ste 150 Pompano Beach, FL 33069	☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/T George Sarafianos 1000 West McNab Road Ste 150 Pompano Beach FL 33069	☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D J. Scott Gunn 1000 West McNab Road, Ste 150 Pompano Beach, FL 33069	☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Michael Evanoff 1000 W. McNab Road Ste 150 Pompano Beach FL 33069	☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	COO Mark Haworth 1000 West McNab Road, Ste 150 Pompano Beach, FL 33069	☐ Change ☒ Addition	
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Kary A. Capi-Gunn</u> <u>Kary A. Capi-Gunn</u> <u>4/28/04</u> <u>(954) 943-8627</u>					