

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 204335

FILED
Feb 16, 2004
Secretary of State

Entity Name: HYMAROLD CORPORATION

Current Principal Place of Business:

P O BOX 1628
BONITA SPRINGS, FL 34133 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 1628
BONITA SPRINGS, FL 34133 US

New Mailing Address:

FEI Number: 65-0177373 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH II, HAROLD S
27816 BAREFOOT LN
BONITA SPRINGS, FL 34135

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: SMITH II, HAROLD S,
Address: 27186 BAREFOOT LN
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D (X) Delete
Name: SMITH,MARY W,
Address: 551 8TH AVE. S.
City-St-Zip: NAPLES, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: HAROLD S SMITH II

PSD

02/16/2004

Electronic Signature of Signing Officer or Director

Date