

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 338353

FILED
Feb 16, 2004
Secretary of State

Entity Name: ROEPNACK CORPORATION

Current Principal Place of Business:

3195 N POWERLINE RD
100
POMPANO BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

3195 N POWERLINE RD
100
POMPANO BEACH, FL 33069

New Mailing Address:

FEI Number: 59-1229240 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROEPNACK, DAVID H
5313 NW 89TH DRIVE
CORAL SPRINGS, FL 33067 US

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: PTD () Delete
Name: ROEPNACK, DAVID H.,
Address: 5313 NW 89TH DRIVE
City-St-Zip: CORAL SPRINGS, FL 33067

Title: S () Delete
Name: STEINMETZ, WILLIAM G. .
Address: 270 S.E. 8TH COURT
City-St-Zip: POMPANO BEACH, FL 33060

Title: COTD () Delete
Name: ROEPNACK, ROBERT A
Address: 115 WHITE SANDS DRIVE
City-St-Zip: CARY, NC 27513

Title: VPD () Delete
Name: SMITH, BRADFORD
Address: 1009 MANGO ISLE
City-St-Zip: FORT LAUDERDALE, FL 33315

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: WILLIAM G. STEINMETZ

SEC

02/16/2004

Electronic Signature of Signing Officer or Director

_____ Date