2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2004
Secretary of State

DOCUMENT# 458608

Entity Name: JOHN E. MCCAUSLAND, INC.

Current Principal Place of Business:

P.O. BOX 3202
JACKSONVILLE, FL 322063202

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3202
JACKSONVILLE, FL 322063202

New Mailing Address:

FEI Number: 59-1547406 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEPRELL, SAMUEL L
901 BLACKSTONE BUILDING
233 E BAY ST
JACKSONVILLE, FL 32202 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: P ( ) Delete
Name: BODKIN, SCOTT A
Address: 10983 PROSPECTOR DR
City-St-Zip: JACKSONVILLE, FL 32218

Title: VP ( ) Delete
Name: SEUIS, RICKY L
Address: 12419 ERIC AVE
City-St-Zip: JACKSONVILLE, FL 32218

Title: ST ( ) Delete
Name: DUNN, NANCY E
Address: 1283-H BLANDING BLVD
City-St-Zip: ORANGE PARK, FL 32065

Title: VP (X) Delete
Name: CLARK, JACK A
Address: 7578 PHEASENT PATH
City-St-Zip: JACKSONVILLE, FL 32244

Title: T (X) Delete
Name: JAEGER, LINDA K
Address: 5614 MARATON PARKWAY
City-St-Zip: JACKSONVILLE, FL 32244

Title: P (X) Delete
Name: MCCORMICK, MICHAEL K
Address: 259 LEIGH GATE ROAD
City-St-Zip: GLASTONBURY, CT 06033

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: MCCORMICK, MICHAEL K
Address: 259 LEIGHGATE ROAD
City-St-Zip: GLASTONBURY, CT 06033

Title: VP (X) Change ( ) Addition
Name: CLARK, JACK A
Address: 7578 PHEASENT PATH DRIVE
City-St-Zip: JACKSONVILLE, FL 32244

Title: ST (X) Change ( ) Addition
Name: JAEGER, LINDA K
Address: 5614 MARATHON PARKWAY
City-St-Zip: JACKSONVILLE, FL 32244

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: LINDA K JAEGER ST 02/06/2004
Electronic Signature of Signing Officer or Director — Date