

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 474345

FILED
Apr 01, 2004
Secretary of State

Entity Name: MEDIA DESIGN GROUP, INC.

Current Principal Place of Business:

1133 MORSE BOULEVARD
SUITE 100
WINTER PARK, FL 32789

New Principal Place of Business:

1353 PALMETTO AVE.
SUITE 120
WINTER PARK, FL 32789

Current Mailing Address:

1133 MORSE BOULEVARD
SUITE 100
WINTER PARK, FL 32789

New Mailing Address:

P.O. BOX 1663
WINTER PARK, FL 32790

FEI Number: 59-1646436

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SLACK, JOHN D
1133 WEST MORSE BOULEVARD
SUITE 100
WINTER PARK, FL 32789

Name and Address of New Registered Agent:

SLACK, JOHN D
1353 PALMETTO AVE.
SUITE 120
WINTER PARK, FL 32789

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: JOHN D. SLACK

04/01/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: STD () Delete
Name: HUESCA, KAREN W
Address: 131 WIMBLEDON CIRCLE
City-St-Zip: LAKE MARY, FL 32746

Title: VD () Delete
Name: SLACK, JOHN D
Address: 531 GRANADA WAY
City-St-Zip: LONGWOOD, FL 32750

Title: D () Delete
Name: WATSON, LAWRENCE M JR
Address: 1650 LAUREL ROAD
City-St-Zip: WINTER PARK, FL 32789

Title: PD () Delete
Name: HUESCA, ANTHONY
Address: 131 WIMBLEDON CIRCLE
City-St-Zip: LAKE MARY, FL 32746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: SLACK, TICHKA
Address: 531 GRANADA WAY
City-St-Zip: LONGWOOD, FL 32750

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: JOHN D. SLACK

VD

04/01/2004

Electronic Signature of Signing Officer or Director

Date