2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 618970

Entity Name: MA-EL, CO.

FILED Apr 26, 2004 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

716 LAKE CHARLES CIR
PORT SAINT LUCIE, FL 349863446 US
716 LAKE CHARLES CIRCLE
PORT SAINT LUCIE, FL 34986 US

Current Mailing Address: New Mailing Address:

585 S RONAL REAGAN BLVD
STE 121
LONGWOOD, FL 327505462 US

1714 TORRINGTON CIRCLE
LONGWOOD, FL 32750 US

FEI Number: 59-2739004 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GEORGE HODGES, EA

585 SOUTH RONALD REAGAN BLVD

STE 121

LONGWOOD, FL 327505462 US

COOPER, G D PRES

716 LAKE CHARLES CIRCLE

PORT SAINT LUCIE, FL 34986 US

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: G D COOPER 04/26/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD () Delete Title: P,D (X) Change () Addition Name: COOPER, G D Name: COOPER, G D PRES
Address: 585 S RONALD REAGAN BLVD STE 121 Address: 716 LAKE CHARLES CIRCLE

Address: 585 S RONALD REAGAN BLVD STE 121 Address: 716 LAKE CHARLES CIRCLE
City-St-Zip: LONGWOOD, FL 32750 City-St-Zip: PORT SAINT LUCIE, FL 34986 US

 Title:
 () Delete
 Title:
 STD () Change (X) Addition

 Name:
 Name:
 HODGES, DEBORAH C SEC

 Address:
 Address:
 1714 TORRINGTON CIRCLE

 City-St-Zip:
 City-St-Zip:
 LONGWOOD, FL 32750 US

Title: () Delete Title: VP,D () Change (X) Addition

Name:Name:DEVRIES-KOESTER, DONNETTE M VPAddress:Address:11157 STANTON STREETCity-St-Zip:City-St-Zip:WEST OLIVE, MI 49460 US

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: DEBORAH C HODGES SEC 04/26/2004