

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 838970

FILED  
Apr 06, 2004  
Secretary of State

Entity Name: HIRAM WALKER-AV CO.

## Current Principal Place of Business:

9350 SO. DIXIE HWY  
1450  
MIAMI, FL 33156 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 33006  
DETROIT, MI 482325006 US

## New Mailing Address:

FEI Number: 38-1586438

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 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: C ( ) Delete  
Name: TURNER, RICHARD  
Address: THE PAVILIONS, BRIDGEWATER RD  
City-St-Zip: BEDMINSTER DOWN, BRISTOL, BS13 8AR

Title: PD ( ) Delete  
Name: CONSUEGRA, ANDY  
Address: 9350 SO. DIXIE HWY, STE.1450  
City-St-Zip: MIAMI, FL 33156

Title: TD ( ) Delete  
Name: CONSTANDIS, CON  
Address: 355 RIVERSIDE AVE.  
City-St-Zip: WESTPORT, CT 06880

Title: VPS ( ) Delete  
Name: STANTON, DAVID M  
Address: 2072 RIVERSIDE DR E  
City-St-Zip: WINDSOR, ONTARIO CANADA, N84 4S5

Title: AT ( ) Delete  
Name: CREMERING, MICHAEL J  
Address: 2072 RIVERSIDE DR E  
City-St-Zip: WINDSOR, ONTARIO CANADA, N84 4S5

Title: VP ( ) Delete  
Name: MCBRIDE, MAUREEN VPAGC  
Address: 355 RIVERSIDE AVENUE  
City-St-Zip: WESTPORT, CT 06880

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: RICHARDSON, CHARLES  
Address: THE PAVILIONS, BRIDGEWATER ROAD  
City-St-Zip: BEDMINSTER DOWN, BRISTOL, UK BS138AR UK

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:

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: MAUREEN MCBRIDE

VP

04/06/2004

Electronic Signature of Signing Officer or Director

Date

MICHAEL KENNEDY (AT)  
355 RIVERSIDE AVENUE  
WESTPORT, CT 06880

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355 RIVERSIDE AVENUE  
WESTPORT, CT 06880