## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F01000000443

FILED Jan 13, 2004 Secretary of State

Entity Na	me: R/CTHE	ATRES MANAGEMENT CORF	PORATION		
Current P	rincipal Place	e of Business:	New Principal Place	New Principal Place of Business:	
	HERRY HILL C FOWN, MD 2				
Current M	lailing Addre	ss:	New Mailing Address:		
PO BOX 1 REISTERS	056 STOWN, MD	21136			
FEI Number	: 52-1517336	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of (	Current Registered Agent:	Name and Address o	f New Registered Agent:	
WINGFIELD, JOHN 7200 US HWY 19 N., SUITE 608 PINELLAS PARK, FL 33781 US			BASALLO, CHERYL 7200 US HWY 19 N PARKSIDE MOVIES 16 PINELLAS PARK, FL 33781 US		
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE: CHERYL	. BASALLO		01/13/2004	
	Electro	nic Signature of Registered Age	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CPD ( ANDERSON, J 2751 STONE F WESTMINSTE	ROAD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( ANDERSON, J 2751 STONE F WESTMINSTE	ROAD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VD ( PHILLIPS, DAV 2500 APACHE BALTIMORE, M	CIR.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	V ( DANIELS, DEN 994 WILDA DF WESTMINSTE	₹.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	ST ( HERSHEL, RIC 7818 WENDO		Title: Name: Address:	( ) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE:	DAVID PHILLIPS	CFO	01/13/2004

City-St-Zip: BALTIMORE, MD 21234