## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F01000000927

Title:

Name:

Address:

City-St-Zip:

TD

DAY, RICHARD H

CINCINNATI, OH 45202

( ) Delete

221 EAST FOURTH STREET, SUITE 2310

Entity Name: HUNT PACIFIC MANAGEMENT CORPORATION

FILED Jan 19, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 221 EAST FOURTH STREET, SUITE 2310 CINCINNATI, OH 45202 **Current Mailing Address: New Mailing Address:** 221 EAST FOURTH STREET, SUITE 2310 CINCINNATI, OH 45202 FEI Number: 33-0422986 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: PARACORP INCORPORATED 236 EAST 6TH AVENUE TALLAHASSEE, FL 32303 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition HOCKEMA, RICHARD W Name: Name: 221 EAST FOURTH STREET, SUITE 2310 Address: Address: City-St-Zip: CINCINNATI, OH 45202 City-St-Zip: Title: Title: () Delete () Change () Addition Name: WEBER, DANIEL J Name: 242 WEST MAIN STREET, SUITE 104310 Address: Address: **TUSTIN, CA 92780** City-St-Zip: City-St-Zip: ( ) Delete Title: Title: SD () Change () Addition MULRONEY, PATRICIA J Name: Name: 221 EAST FOURTH STREET, SUITE 2310 Address: Address: City-St-Zip: CINCINNATI, OH 45202 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: PATRICIA J. MULRONEY SEC 01/19/2004

() Change () Addition