

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000004963

Entity Name: PCM HOLDINGS, INC.

FILED  
Jan 08, 2004  
Secretary of State

## Current Principal Place of Business:

100 LIGHT STREET  
23RD FLOOR-LEGAL  
BALTIMORE, MD 21202

## New Principal Place of Business:

## Current Mailing Address:

100 LIGHT STREET  
23RD FLOOR-LEGAL  
BALTIMORE, MD 21202

## New Mailing Address:

FEI Number: 52-2324948

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GALLAGHER, LISA K  
8889 PELICAN BAY BLVD., STE 500  
NAPLES, FL 341087512 US

## Name and Address of New Registered Agent:

JOYCE, DAVID G  
8889 PELICAN BAY BLVD., STE 500  
NAPLES, FL 341087512 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: DAVID G. JOYCE

01/08/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: POWERS, GREGG  
Address: 8889 PELICAN BAY BLVD, STE 500  
City-St-Zip: NAPLES, FL

Title: CEOD ( ) Delete  
Name: HERMAN, BRUCE S  
Address: 8889 PELICAN BAY BLVD, SUITE 500  
City-St-Zip: NAPLES, FL 34108

Title: STC ( ) Delete  
Name: JOYCE, DAVID G  
Address: 8889 PELICAN BAY BLVD, STE 500  
City-St-Zip: NAPLES, FL

Title: CD ( ) Delete  
Name: BAIN, PETER  
Address: 100 LIGHT STREET  
City-St-Zip: BALTIMORE, MD

Title: D ( ) Delete  
Name: MASON, RAYMOND  
Address: 100 LIGHT STREET  
City-St-Zip: BALTIMORE, MD

Title: D ( ) Delete  
Name: SCHEVE, TIMOTHY  
Address: 100 LIGHT STREET  
City-St-Zip: BALTIMORE, MD

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: CEOD (X) Change ( ) Addition  
Name: SHERMAN, BRUCE S  
Address: 8889 PELICAN BAY BLVD, SUITE 500  
City-St-Zip: NAPLES, FL 34108

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: DAVID G. JOYCE

STC

01/08/2004

Electronic Signature of Signing Officer or Director

Date