2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000000823

Entity Name: GULDMANN, INC.

FILED Jan 06, 2004 Secretary of State

Current Principal Place of Business: New Principal Place	of Business:
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5505 JOHNS ROAD STE 700 5505 JOHNS ROAD STE 700 TAMPA, FL 33602 TAMPA, FL 33634

Current Mailing Address: New Mailing Address:

5505 JOHNS ROAD STE 700 5505 JOHNS ROAD STE 700 TAMPA, FL 33602 TAMPA, FL 33634 US

FEI Number: 58-2360050 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

KOCH, STEPHEN A KOCH, STEPHEN A 1 TAMPA CITY CENTER, STE 3010 500 E. KENNEDY BLVD. 201 NORTH FRANKLIN STREET SUITE 100 TAMPA, FL 33602 US TAMPA, FL 33602 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: 01/06/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCD () Delete Title: (X) Change () Addition BUSSEE JENSEN, ANDRES D BUSSE JENSEN, ANDERS D Name: Name: 5505 JOHNS ROAD, STE 700 5505 JOHNS ROAD, STE 700 Address: Address: TAMPA, FL 33634 City-St-Zip: City-St-Zip: TAMPA, FL 33634 US

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

Name: CARLSVIG. OUVIND Name: V. GULDMAN A/S GRAHAM BELLS VEJ 23A Address: Address: 8200 AARHUS N DENMARK, City-St-Zip: City-St-Zip:

Title: (X) Change () Addition Title: SD () Delete SD HORTEN, MICHAEL R HORTEN, MICHAEL R Name: Name:

3479 PACEFERRY CIRCLE 3479 PACEFERRY CIRCLE Address: Address: City-St-Zip: SMYRNA, GA City-St-Zip: SMYRNA, GA 30324 US

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

KOCH, STEPHEN A KOCH, STEPHEN A Name: Name: Address: 201 NORTH FRANKLIN ST. STE. 3010 Address: 500 E. KENNEDY BLVD. STE. 100

City-St-Zip: City-St-Zip: TAMPA, FL 33602 TAMPA, FL 33602 US

Title: Title: () Change (X) Addition

() Delete MATHIESEN, BJORN Name: Name: Address: Address: GRAHAM BELLS VEG 21-23A City-St-Zip: City-St-Zip: DK 8500 ARHUS N, DK 8500 DK

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: ANDERS D. BUSSE JENSEN **PCD** 01/06/2004