

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003488

Entity Name: HAMILTON NEW MEDIA, INC.

FILED  
Feb 03, 2004  
Secretary of State

## Current Principal Place of Business:

113 SINCLAIR STREET SW  
PORT CHARLOTTE, FL 33952

## New Principal Place of Business:

3630 BONAIRE CT  
PUNTA GORDA, FL 33950

## Current Mailing Address:

PO BOX 496080  
PORT CHARLOTTE, FL 33949

## New Mailing Address:

PO BOX 1926  
ENGLEWOOD, FL 34295

FEI Number: 71-0769280

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MYERS, SONYA  
113 SINCLAIR STREET SW  
PORT CHARLOTTE, FL 33952 US

## Name and Address of New Registered Agent:

MYERS, SONYA  
3630 BONAIRE CT  
PUNTA GORDA, FL 33950 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:

02/03/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MYERS, WILLIAM H  
Address: PO BOX 496080  
City-St-Zip: PORT CHARLOTTE, FL 33949

Title: V ( ) Delete  
Name: MYERS, SONYA B  
Address: PO BOX 496080  
City-St-Zip: PORT CHARLOTTE, FL 33949

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MYERS, WILLIAM H  
Address: PO BOX 1926  
City-St-Zip: ENGLEWOOD, FL 34295

Title: V (X) Change ( ) Addition  
Name: MYERS, SONYA B  
Address: PO BOX 1926  
City-St-Zip: ENGLEWOOD, FL 34295

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: SONYA MYERS

V

02/03/2004

Electronic Signature of Signing Officer or Director

Date