2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000003124

Entity Name: MEMBER AGENCIES, INC.

FILED Jan 12, 2004 Secretary of State

16720 BEUCLAIRE CT. 16720 BEUCLAIRE CT. TAVARES, FL 32778 US TAVARES, FL 32778

Current Mailing Address: New Mailing Address:

16720 BEUCLAIRE CT. 16720 BEUCLAIRE CT. TAVARES, FL 32778 TAVARES, FL 32778 US

FEI Number: 35-2180995 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

REITER, MICHAEL REITER, MICHAEL 16720 BEUCLAIRE CT. 16720 BEUCLAIRE CT. TAVARES, FL 32778 US TAVARES, FL 32778

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: 01/12/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

City-St-Zip:

TAVARES, FL 32778

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

TAVARES, FL 32778 US

Title: () Delete Title: (X) Change () Addition RICE, MICHAEL RICE, MICHAEL Name: Name:

14 RENA MARIE CIR. 14 RENA MARIE CIR. Address: Address:

City-St-Zip: WASHINGTONVILLE, NY 10992 City-St-Zip: WASHINGTONVILLE, NY 10992 US

Title: VST Title: () Delete (X) Change () Addition Name: REITER, MICHAEL Name: REITER, MICHAEL 16720 BEUCLAIRE CT. 16720 BEUCLAIRE CT. Address: Address:

Title:

City-St-Zip:

Title: VP. () Delete VΡ (X) Change () Addition RICE, LORI RICE, LORI Name: Name:

14 RENA MARIE CIR. 14 RENA MARIE CIR Address: Address:

City-St-Zip: WASHINGTONVILLE, NY 10992 City-St-Zip: WASHINGTONVILLE, NY 10992 US

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

REITER, RHONDA Name: Name: Address: Address: 16720 BEAUCLAIRE CT. City-St-Zip: City-St-Zip: TAVARES, FL 32778 US

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: MICHAEL REITER **VST** 01/12/2004