


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2004 8:00 am
Secretary of State

04-05-2004 90046 038 ***158.75

DOCUMENT # F03000003205					
1. Entity Name GENESIS SOLUTIONS, INC.					
Principal Place of Business 100 DANBURY RD., SUITE 105 RIDGFIELD, CT 06877			Mailing Address 100 DANBURY RD., SUITE 105 RIDGFIELD, CT 06877		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		Zip	
Country		Country		02232004 Chg-P CR2E034 (10/03)	
4. FEI Number 02-0505660				Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
SILVER, STEPHEN 4151 GULF SHORE BLVD. NORTH, UNIT #1203 NAPLES, FL 34103			Name <u>Eric P. Van Heiningen</u> Street Address (P.O. Box Number is Not Acceptable) <u>2940 Mourning Dove Way</u> City <u>Titusville</u> FL Zip Code <u>32780</u>		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u>[Signature]</u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>			DATE <u>3/29/2004</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD SILVER, STEPHEN W 100 DANBURY RD., SUITE 105 RIDGFIELD, CT 06877 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVPD BRISSON, WAYNE P 100 DANBURY RD., SUITE 105 RIDGFIELD, CT 06877 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO MACARTHUR, BURTON G 100 DANBURY RD., SUITE 105 RIDGFIELD, CT 06877 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVPS MACARTHUR, ROBERT D 100 DANBURY RD., SUITE 105 RIDGFIELD, CT 06877 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVPD TERFEHR, THOMAS R 100 DANBURY RD., SUITE 105 RIDGFIELD, CT 06877 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFOT GRAVES, CARL D 100 DANBURY RD., SUITE 105 RIDGFIELD, CT 06877 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>[Signature]</u> <u>Carl D. Graves</u> <u>3/29/04</u> <u>203-431-0281</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					