2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000002236

FILED Apr 27, 2004 Secretary of State

Entity Name: GOLDSMITH, AGIO, HELMS & COMPANY, INCORPORATED

Current Principal Place of Business: New Principal Place of Business: 1170 THIRD ST S C201 NAPLES, FL 34102 **New Mailing Address: Current Mailing Address:** 1170 THIRD ST S C201 NAPLES, FL 34102 US FEI Number: 41-1459808 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GOLDSMITH, STEVEN M 1170 THIRD STREET SOUTH NAPLES, FL 33940 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: (X) Change () Addition CCO () Delete Title: CCFO GOLDSMITH, STEVEN M GOLDSMITH, STEVEN M Name: Name: 4351 GULF SHORES BLVD. ESTATE 5N 4351 GULF SHORES BLVD. ESTATE 5N Address: Address: NAPLES, FL 34103 City-St-Zip: City-St-Zip: NAPLES, FL 34103 Title: PC00 Title: PC00 () Delete (X) Change () Addition HELMS, JACK P Name: HELMS, JACK P Name: 4906 LAKEVIEW DR 4906 LAKEVIEW DR Address: Address: EDINA, MN 55424 City-St-Zip: EDINA, MN City-St-Zip: Title: FVP () Delete Title: () Change () Addition LYNNER, TERRY A Name: Name: 6505 SHAWNEE CIR Address: Address: City-St-Zip: EDINA, MN 55439 City-St-Zip: Title: VPC () Delete Title: () Change () Addition PECHA, KYLE A Name: Name: Address: 2913 RICE CRK PKWY Address: City-St-Zip: BLAINE, MN 55449 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: KYLE A. PECHA VPC 04/27/2004