


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2004 08:00 AM
Secretary of State

DOCUMENT # F94000001862

1. Entity Name
ASSOCIATION OF ENERGY SERVICES PROFESSIONALS, INCORPORATED



Principal Place of Business Mailing Address

17610 128TH TRAIL NORTH 17610 128TH TRAIL NORTH
 JUPITER, FL 33478 JUPITER, FL 33478

DO NOT WRITE IN THIS SPACE



01142004 No Chg-NP CR2E037 (10/03)

4. FEI Number Applied For
 33-0369768 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

BOARDMAN, ELLIOT B
 17610 128TH TRAIL NORTH
 JUPITER, FL 33478

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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

Filing Fee is \$61.25 Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	MATT, MEG
STREET ADDRESS	14402 S 22ND STREET
CITY-ST-ZIP	PHOENIX, AZ 85048
TITLE	T
NAME	MCCARTHY, PATRICK
STREET ADDRESS	2277 RESEARCH BLVD.
CITY-ST-ZIP	ROCKVILLE, MD 20850
TITLE	M
NAME	BOARDMAN, ELLIOT B
STREET ADDRESS	17610 128TH TRAIL NORTH
CITY-ST-ZIP	JUPITER, FL 33478
TITLE	V
NAME	KATES, BRAD
STREET ADDRESS	1030 MASSACHUSETTS AVE.
CITY-ST-ZIP	CAMBRIDGE, MA 02138
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 01/23/04-80012-006 61.25

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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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE: Elliot Boardman Elliot Boardman 561-575-2334
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Mailing Phone #