2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2004
Secretary of State

DOCUMENT# F94000003495

Entity Name: PLUMMER, INCORPORATED

Current Principal Place of Business:

610 HICKMAN CIRCLE
SUITE 100
SANFORD, FL 32771 US

New Principal Place of Business:

Current Mailing Address:

610 HICKMAN CIRCLE
SUITE 100
SANFORD, FL 32771 US

New Mailing Address:

FEI Number: 31-1191689 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GRUND, GARY I
610 HICKMAN CIRCLE
SUITE 100
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

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:

Title: VS ( ) Delete
Name: WOODDELL, PAMELA
Address: 320 OUTERBELT ST., SUITE I
City-St-Zip: COLUMBUS, OH 43213

Title: PC ( ) Delete
Name: GRUND, GARY I
Address: 610 HICKMAN CIRCLE SUITE 100
City-St-Zip: SANFORD, FL 32771

Title: V ( ) Delete
Name: DECAUL, BRIAN
Address: 610 HICKMAN CIRCLE SUITE 100
City-St-Zip: SANFORD, FL 32771

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: WOODDELL, PAMELA
Address: 320 OUTERBELT ST., SUITE I
City-St-Zip: COLUMBUS, OH 43213

Title: C (X) Change ( ) Addition
Name: GRUND, GARY I
Address: 610 HICKMAN CIRCLE SUITE 100
City-St-Zip: SANFORD, FL 32771

Title: V (X) Change ( ) Addition
Name: DECAUL, BRYAN
Address: 610 HICKMAN CIRCLE SUITE 100
City-St-Zip: SANFORD, FL 32771

Title: V ( ) Change (X) Addition
Name: LUNDGREN, ERIC
Address: 320 OUTERBELT STREET, SUITE I
City-St-Zip: COLUMBUS, OH 43213

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: PAMELA WOODDELL P 05/01/2004

Electronic Signature of Signing Officer or Director Date