## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F94000004408

Entity Name: PILLAR TO POST, INC.

FILED Feb 18, 2004 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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13902 NORTH DALE MABRY HIGHWAY SUITE 300 TAMPA, FL 33618

Current Mailing Address: New Mailing Address:

13902 NORTH DALE MABRY HIGHWAY SUITE 300 TAMPA, FL 33618

FEI Number: 59-3256869 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:

CORPORATION SERVICE COMPANY

1201 HAYS STREET

TALLAHASSEE, FL 323012525 US

SIVYER BARLOW & WATSON, P.A.

100 SOUTH ASHLEY DRIVE

SUITE 2150

TAMPA, FL 33602 US

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: PAUL WATSON 02/18/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition BREWER, J M ROGERS, STEVEN D Name: Name: 1800 THE COLLEGE WAY PH-4 5397 EGLINTON AVE W SUITE 108 Address: Address: City-St-Zip: MISSISSANGA, ON City-St-Zip: ETOBICOKE, ON M9C 5K6 CA

Title: PD ( ) Delete Title: MR (X) Change ( ) Addition Name: NORRIS, WILLIAM R Name: HAYMAN, PAUL DP

Address: 170 PIPER DRIVE Address: 5397 EGLINTON AVE W SUITE 108
City-St-Zip: RED DEER, ALBERTA, CANADA, City-St-Zip: ETOBICOKE, ON M9C 5K6 CA

Title: V ( ) Delete Title: MR (X) Change ( ) Addition Name: CASTLEMAN, M A Name: CLEMENTS, PAUL DS

Address: 4708 DEERWALK AVE Address: 5397 EGLINTON AVE W SUITE 108 City-St-Zip: TAMPA, FL 33624 City-St-Zip: ETOBICOKE, ON M9C 5K6 CA

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

 Name:
 Name:
 LEBORG, HENRIK T

 Address:
 Address:
 5805 WHITTLE ROAD SUITE 211

 City-St-Zip:
 City-St-Zip:
 MISSISSAUGA, ON L4Z 2J1 CA

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

Name: CASTLEMAN, ALLEN V

Address: Address: 13902 N DALE MABRY HWY SUITE 300

City-St-Zip: City-St-Zip: TAMPA, FL 33618 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: HENRIK LEBORG MR 02/18/2004