2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 18, 2004
Secretary of State

DOCUMENT# F96000003297

Entity Name: CONSULTANTS FOR STRATEGIC GROWTH, INC.

Current Principal Place of Business:

35600 BERMOUNT ROAD
PUNTA GORDA, FL 33982

New Principal Place of Business:

Current Mailing Address:

35600 BERMOUNT ROAD
PUNTA GORDA, FL 33982

New Mailing Address:

FEI Number: 62-1031557 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PRESLEY, BRIAN
35600 BERMONT ROAD
PUNTA GORDA, FL 33982

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:	DCP	( ) Delete
Name:	PRESLEY, BRIAN	
Address:	35600 BERMONT ROAD	
City-St-Zip:	PUNTA GORDA, FL 33982	
Title:	DCST	( ) Delete
Name:	PRESLEY, MARY M	
Address:	35600 BERMONT ROAD	
City-St-Zip:	PUNTA GORDA, FL 33982	
Title:	DVP	( ) Delete
Name:	BEANE, CYNTHIA P	
Address:	726 1ST AVE N	
City-St-Zip:	NAPLES, FL 34102	
Title:	V	( ) Delete
Name:	PRESLEY, DAVID R	
Address:	200 AQUI ESTA	
City-St-Zip:	PUNTA GORDA, FL 33950	
Title:	V	( ) Delete
Name:	PRESLEY, DEBRA A	
Address:	35200 BERMONT RD	
City-St-Zip:	PUNTA GORDA, FL 33982	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	DVP	(X) Change ( ) Addition
Name:	BEANE, CYNTHIA P	
Address:	1700 CASEY KEY DRIVE	
City-St-Zip:	PUNTA GORDA, FL 33950	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
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: MARY M. PRESLEY ST 03/18/2004

Electronic Signature of Signing Officer or Director — Date