

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2004 8:00 am
Secretary of State

02-09-2004 90043 020 ***150.00

DOCUMENT # F96000003967	
1. Entity Name CAPITAL CONSULTANTS MANAGEMENT CORPORATION	

Principal Place of Business 7557 RAMBLER RD., #850 DALLAS, TX 75231	Mailing Address 7557 RAMBLER RD., #850 DALLAS, TX 75231
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address 8360 E. VIA DE VENTURA L100
City & State	City & State SCOTTSDALE, AZ
Zip	Country 85258 MARICOPA

02052004 Chg-P CR2E034 (10/03)

4. FEI Number 75-1410902	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent WASSON, PATRICIA A 690 CELEBRATION AVE. CELEBRATION, FL 34747	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

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 _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SIBLER, JEREMY 7557 RAMBLER RD., #850 DALLAS, TX 75231 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD ALSPAUGH, JUDITH L 7557 RAMBLER RD., #850 DALLAS, TX 75231 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD FREEMAN, ROLAND 7557 RAMBLER RD., #850 DALLAS, TX 75231 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BOUDREAU, EDWARD H 7557 RAMBLER RD #850 DALLAS, TX 75231 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD ALSPAUGH, JUDITH L 8360 E. VIA DE VENTURA SUITE L100 SCOTTSDALE, AZ 85258 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOUDREAU, EDWARD H. 7557 RAMBLER RD, SUITE 850 DALLAS, TX 75231 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PARK, BARTHOLOW, III 8360 E. VIA DE VENTURA SUITE L100 SCOTTSDALE, AZ 85258 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GIBBONS, DAVID W 7557 RAMBLER RD., #850 DALLAS, TX 75231 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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

SIGNATURE:  **2/5/04**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #