


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 03, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # F97000001176</b>	
1. Entity Name TRIUMPH/JDC COMPANY	

Principal Place of Business 5500 NW 21 TERR FT LAUDERDALE AIRPORT HANGER #7 FT LAUDERDALE, FL 33309 US	Mailing Address 1550 LIBERTY RIDGE DRIVE STE 100 WAYNE, PA 19087
---	---



01062004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 23-2884213	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525	<b>DO NOT WRITE IN THIS SPACE</b>
--	-----------------------------------

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	U000000154458 05/04/04-80168-003 150.00
---	--	--

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DC ILL, RICHARD C 1550 LIBERTY RIDGE DR STE 100 WAYNE, PA 19087
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VT BARTHOLDSON, JOHN R 1550 LIBERTY RIDGE DRIVE STE 100 WAYNE, PA 19087
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S EISENSTAEDT, RICHARD M 1550 LIBERTY RIDGE DRIVE STE 100 WAYNE, PA 19087
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P VORSAS, DAVID 5520 NW 21 TERR, HANGAR #7 FORT LAUDERDALE, FL 33309
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE IN THIS SPACE**

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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/04  
Date

610-257-1000  
Daytime Phone