

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000001093

FILED
Mar 22, 2004
Secretary of State

Entity Name: HOPPMANN CORPORATION

Current Principal Place of Business:

15395 JOHN MARSHALL HWY
HAYMARKET, VA 20169

New Principal Place of Business:

Current Mailing Address:

15395 JOHN MARSHALL HWY
HAYMARKET, VA 20169

New Mailing Address:

FEI Number: 54-0600112

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: CD () Delete
Name: HOPPMANN, PETER G
Address: 15395 JOHN MARSHALL HIGHWAY
City-St-Zip: HAYMARKET, VA 20169

Title: PD () Delete
Name: FLANAGAN, MARK J
Address: 15295 JOHH MARSHALL HIGHWAY
City-St-Zip: HAYMARKET, VA 20169

Title: D () Delete
Name: SCHOBBER, HORST
Address: 15395 JOHN MARSHALL HIGHWAY
City-St-Zip: HAYMARKET, VA 20169

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: FLANAGAN, MARK J
Address: 15395 JOHH MARSHALL HIGHWAY
City-St-Zip: HAYMARKET, VA 20169

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: SLUSHER, MARIANNE P
Address: 15395 JOHN MARSHALL HIGHWAY
City-St-Zip: HAYMARKET, VA 20169

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: MARIANNE SLUSHER

VP

03/22/2004

Electronic Signature of Signing Officer or Director

Date