## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## 04 AUG -1 AM 9:21 **DOCUMENT # F99000001099** MEDALLIST OPERATIONS, INC. SECRETARY OF STATE FALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 1070 E. INDIANTOWN RD 1070 E. INDIANTOWN RD **SUITE 208 SUITE 208** JUPITER, FL 33477 JUPITER, FL 33477 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07012004 Cha-P CR2E034 (10/03) 4, FEI Number Applied For City & State City & State 65-0906440 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HUGHES, J. ROBERT ESQ Street Address (P.O. Box Number is Not Acceptable) 220 MCKENZIE AVE PANAMA CITY, FL 32401 ndiantown 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 7/16/04. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 **\$5.00** May Be In accordance with s. 607.193(2)(b), F.S., the $\Box$ Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 8, 2004 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE TITLE P ☐ Change Addition Delete 1070 E Indiantown Rol suite 208 NAME MOSS, WILLIAM J NAME Frank Weed L 14 ONE MARTIN PLACE STREET ADDRESS STREET ADDRESS SYDNEŸ, NS 2000 Jupiter, FL 39477 CITY - ST- ZIP CITY-ST-ZIP TITLE ☐ Change Addition ☐ Delete TITLE Jim Griffin COLLINS, CHARLES B III NAME NAME 1670 E Indiantown Rd Suite 208 STREET ADDRESS STREET ADDRESS 501 N. A1A Switer, FL 33477 CITY-ST-ZIP JUPITER, FL 33477 CITY-ST-ZIP 🔀 Delete Anthony P Fehon 1 14 One Martin Place 🔀 Change ☐ Addition TITLE TITLE FEHON, ANTHONY P NAME NAME L 14 ONE MARTIN PLACE STREET ADDRESS STREET ADDRESS sydney; NS 2000 CITY-ST-ZIP SYDNEY, NS 2000 CITY-ST-ZIP TITLE ☐ Defete TITLE Addition 000040101**6**PP® NAME SEABRIDGE, JEREMY NAME 08/12/04--01003--027 \*\*500.00 1070 E. INDIANTOWN RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JUPITER, FL 33477 CITY-ST-ZIP TITLE Delete TITLE Change Change Addition Rita Pollack DAVIS, WYNN 1070 E Indiantaun Rd. Suite 208 NAME NAME STREET ADDRESS STREET ADDRESS 501 N. A1A Jupiter, FL 33477 CITY-ST-7IP JUPITER, FL 33477 CITY-ST-ZIP □ Delete TITLE B ☐ Addition TITLE SCHNEIDER, JACK Brett Walsh 1070 E. Indiantown Rd. Suite 208 NAME NAME STREET ADDRESS 501 N. A1A STREET ADDRESS CITY-ST-ZIP JUPITER, FL 33477 CITY-ST-ZIP Jupiter, FL 33477 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.

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