

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H10235

FILED
Apr 20, 2004
Secretary of State

Entity Name: CONTEMPORARY MANAGEMENT CONCEPTS, INC.

Current Principal Place of Business:

5800 N.W. 39TH AVE.
SUITE 104
GAINESVILLE, FL 32606 US

New Principal Place of Business:

Current Mailing Address:

5800 N.W. 39TH AVE.
SUITE 104
GAINESVILLE, FL 32606 US

New Mailing Address:

FEI Number: 59-2446722 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MACLEOD, DEBORAH E.
5800 NW 39TH AVE
SUITE 104
GAINESVILLE, FL 32606 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: CEO () Delete
Name: MACLEOD, DEBORAH E.,
Address: 5800 N.W. 39TH AVE., SUITE 104
City-St-Zip: GAINESVILLE, FL

Title: VP () Delete
Name: POWELL, KAREN
Address: 6504 NEALE RD
City-St-Zip: MELROSE, FL 32666

Title: P () Delete
Name: FOX, SONIA
Address: 5800 N.W. 39TH AVE., STE. 104
City-St-Zip: GAINESVILLE, FL 32606 US

Title: VP () Delete
Name: MARTI, JOHN
Address: 1221 NW 107 TERRACE
City-St-Zip: GAINESVILLE, FL 32606

Title: CFO () Delete
Name: DAILEY, PATRICK O
Address: 10646 NW 10TH ROAD
City-St-Zip: GAINESVILLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: MACLEOD, DEBORAH E.,
Address: 5800 N.W. 39TH AVE., SUITE 104
City-St-Zip: GAINESVILLE, FL 32606

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

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

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

Title: CFO (X) Change () Addition
Name: DAILEY, PATRICK O
Address: 9331 N. W. 15TH PLACE
City-St-Zip: GAINESVILLE, FL 32606

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: DEBORAH E MACLEOD

CEO

04/20/2004

Electronic Signature of Signing Officer or Director

_____ Date