## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H27342

FILED Mar 09, 2004 Secretary of State

| Entity Nan  | ne: SHERW             | OOD FINANCIAL SERVIC            | ES, INC.                                    | •  |  |
|---|-----------------------|---------------------------------|---|--|--|
| Current Pr  | incipal Plac          | e of Business:                  | New Principal Pl                            | ace of Business:                             |  |
| 1535 NORT<br>SUITE 101<br>WESTON,   | ΓHPARK DR<br>FL 33326 | US                              |   |  |  |
| Current Mailing Address:  |                       |                                 | New Mailing Add                             | New Mailing Address:                         |  |
| 648 LAKE E<br>WESTON,   |                       | US                              |   |  |  |
| FEI Number:   | 59-2445561            | FEI Number Applied For (        | FEI Number Not Applicable (                 | Certificate of Status Desired ( )            |  |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent: |                       |                                 |   |  |  |
| INTERCON  | THPARK DR             | PROFESSIONAL CTR                |   |  |  |
| The above<br>in the State   |                       | submits this statement for      | the purpose of changing its regis           | ered office or registered agent, or both,    |  |
| SIGNATUR  | RE:                   |                                 |   |  |  |
|   | Electro               | onic Signature of Registered    | l Agent                                     | Date   |  |
| Election Cam  | npaign Financi        | ng Trust Fund Contribution ( ). |   |  |  |
| OFFICERS AND DIRECTORS:   |                       |                                 | ADDITIONS/CHA                               | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | SHERWOOD,             | PARK DR STE 101                 | Title:<br>Name:<br>Address:<br>City-St-Zip: | () Change () Addition                        |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | SHERWOOD,             | PARK DR STE 101                 | Title:<br>Name:<br>Address:<br>City-St-Zip: | () Change () Addition                        |  |

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: MARTIN D. SHERWOOD DPT 03/09/2004