

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H43949

FILED
Jan 29, 2004
Secretary of State

Entity Name: ANTHONY GALIE SEMINARS, INC.

Current Principal Place of Business:

2145 N. HWY A1A
INDIALANTIC, FL 32903

New Principal Place of Business:

310 MARLIN PL
MELBOURNE BEACH, FL 32951

Current Mailing Address:

2145 N. HWY A1A
INDIALANTIC, FL 32903

New Mailing Address:

310 MARLIN PL
MELBOURNE BEACH, FL 32951

FEI Number: 59-2496818

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALIE, ANTHONY
2145 N. HWY A1A
INDIALANTIC, FL 32903

Name and Address of New Registered Agent:

GALIE, ANTHONY
310 MARLIN PL
MELBOURNE BEACH, FL 32951

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: _____

01/29/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P,D () Delete
Name: GALIE, ANTHONY T
Address: 2145 N. HWY A1A
City-St-Zip: INDIALANTIC, FL 32903

Title: VP,T () Delete
Name: GALIE, ANTHONY T
Address: 2145 N. HWY A1A
City-St-Zip: INDIALANTIC, FL 32903

Title: S () Delete
Name: GALIE, ANTHONY T
Address: 2145 N. HWY A1A
City-St-Zip: INDIALANTIC, FL 32903

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: ANTHONY GALIE

P

01/29/2004

Electronic Signature of Signing Officer or Director

Date