## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# J57643

FILED Jan 06, 2004 Secretary of State

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
05 CORF	.D JONES PORATION W FL 34292	AY		
urrent Mailing Address:		New Mailing Addres	New Mailing Address:	
05 CORF	.D JONES PORATION W FL 34292	AY		
El Number	: 59-2769039	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)
ame and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:
ONES, H	MDOLD			
187 GÉN	IEVA ROAD	JS		
187 GÉN ENICE, F he above i the State	IEVA ROAD FL 34293 lendity enamed entity e of Florida.		purpose of changing its registere	ed office or registered agent, or both,
187 GÉN ENICE, F he above the State	IEVA ROAD FL 34293 lendity e named entity e of Florida. RE:	submits this statement for the		
187 GÉN ENICE, F he above i the Stati	IEVA ROAD FL 34293 Le named entity e of Florida. RE: Electro	submits this statement for the		ed office or registered agent, or both,  Date
187 GÉN ENICE, F he above the State IGNATUI	IEVA ROAD FL 34293 Le named entity e of Florida. RE: Electro mpaign Financii	submits this statement for the nic Signature of Registered Acting Trust Fund Contribution ( ).	gent	Date
187 GÉN ENICE, F he above the State IGNATUI	EVA ROAD FL 34293 E named entity e of Florida. RE: Electro mpaign Financia	submits this statement for the nic Signature of Registered Ageng Trust Fund Contribution ( ).  CTORS:  ) Delete DLD E ARD.	gent	
87 GÉN ENICE, F ne above the State GNATUI ection Car FFICER le: le: lme: dress:	e named entity e of Florida.  RE: Electro  mpaign Financia  S AND DIREC  VP ( JONES, HARC 3187 GENEVA VENICE, FL 3	submits this statement for the submits this statement for the specific signature of Registered Age of Trust Fund Contribution ( ).  CTORS:  ) Delete DLD E ARD. 14293  ) Delete DLD AROAD	gent  ADDITIONS/CHANG  Title:  Name:  Address:	Date ES TO OFFICERS AND DIRECTOR

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: SETH KOPLIN VΡ 01/06/2004