2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2004
Secretary of State

DOCUMENT# J60787

Entity Name: N.M.F., INC.

Current Principal Place of Business:

7601 DELLA DRIVE
ORLANDO, FL 32819

New Principal Place of Business:

Current Mailing Address:

722 EAST HOFFNER AVENUE
ORLANDO, FL 32809 US

New Mailing Address:

FEI Number: 59-2784977 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FOSTER, JAMES E
255 S ORANGE AV
SUITE 1700
ORLANDO, FL 32801 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: P ( ) Delete
Name: ARNAULT, JACQUELINE
Address: 3719 SEMINOLE DR.
City-St-Zip: ORLANDO, FL 32812

Title: T ( ) Delete
Name: FOSTER, NANCY M
Address: 3702 CRESCENT PK BLVD
City-St-Zip: ORLANDO, FL 32812

Title: V ( ) Delete
Name: ARNAULT, WARREN
Address: 3719 SEMINLOE DR.
City-St-Zip: ORLANDO, FL 32812

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: NANCY M FOSTER MS 01/07/2004

Electronic Signature of Signing Officer or Director Date