2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J67691

FILED Feb 10, 2004 Secretary of State

Entity Name: PHILLIPS MANAGEMENT COMPANY

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
123 W HIRTH RD					
OFFICE FERNANDINA BCH, FL 32034 US					
Current Mailing Address: New			New Mailing Addres	ss:	
C/O WADE DOGGETT P.O. DRAWER 9515 GREENSBORO, NC 27429					
		FEI Number Not Applicable ()	Certificate of Status Desired ()		
Name and Address of Current Registered Agent:			Name and Address	of New Registered Agent:	
SNED, WILLIAM H., JR. 218 DATURA STREET WEST PALM BEACH, FL 33402					
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:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () D PHILLIPS, KERM 123 W HIRTH RD FERNANDINA BC	OFFICE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DT () D DOGGERT, A. W. 1400 BATTLEBRO GREENSBORO, F	OUND AVE.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DVP () D BELANGIA, WILL 1508 SANDPENN FERNANDINA BE	Y ISLAND	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DT () D DOGGETT, WAD 1400 BATTLEGR GREENSBORO, I	OUND AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () D TURNER, BREND 1400 BATTLEGRO GREENSBORO, N	OUND AVE.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () D HARRIS, TIM 1400 BATTLEGRO GREENSBORO, N		Title: Name: Address: 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: D WADE DOGGETT 02/10/2004 DT Date