

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K69866

FILED
Apr 30, 2004
Secretary of State

Entity Name: MANAGEMENT AND MARKETING SERVICES, INC.

Current Principal Place of Business:

399 NORTH LAUREL DRIVE
MARGATE, FL 33063 US

New Principal Place of Business:

4823 MALIBU DRIVE
LAKE WALES, FL 33859 US

Current Mailing Address:

399 NORTH LAUREL DRIVE
MARGATE, FL 33063 US

New Mailing Address:

4823 MALIBU DRIVE
LAKE WALES, FL 33859 US

FEI Number: 65-0181028

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURGESS, JOSEPH LYMAN, III
399 NORTH LAUREL DRIVE
MARGATE, FL 33063

Name and Address of New Registered Agent:

BURGESS, JOSEPH LYMAN, III
4823 MALIBU DRIVE
LAKE WALES, FL 33859

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:

04/30/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BURGESS, JOSEPH L III
Address: 399 NORTH LAUREL DRIVE
City-St-Zip: MARGATE, FL 33063

Title: D () Delete
Name: BURGESS, RACHELE L
Address: 399 NORTH LAUREL DRIVE
City-St-Zip: MARGATE, FL 33063

Title: D () Delete
Name: BURGESS, JOSEPH A IV
Address: 399 NORTH LAUREL DRIVE
City-St-Zip: MARGATE, FL 33063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BURGESS, JOSEPH L III
Address: 4823 MALIBU DRIVE
City-St-Zip: LAKE WALES, FL 33859 US

Title: D (X) Change () Addition
Name: BURGESS, RACHELE L
Address: 4823 MALIBU DRIVE
City-St-Zip: LAKE WALES, FL 33859

Title: D (X) Change () Addition
Name: BURGESS, JOSEPH A IV
Address: 4823 MALIBU DRIVE
City-St-Zip: LAKE WALES, FL 33859 US

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: JOSEPH L BURGESS III

VP

04/30/2004

Electronic Signature of Signing Officer or Director

Date