

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K75281

FILED
Jul 16, 2004
Secretary of State

Entity Name: LAHAGE & ASSOCIATES, INC.

Current Principal Place of Business:

145 AVE L
DELRAY BEACH, FL 33483

New Principal Place of Business:

P O BOX 810333
BOCA RATON, FL 33481 US

Current Mailing Address:

145 AVE L
DELRAY BEACH, FL 33483

New Mailing Address:

P O BOX 810333
BOCA RATON, FL 33481 US

FEI Number: 65-0113528

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAHAGE, H. FRANK
145 AVENUE L
DELRAY BEACH, FL 33483 US

Name and Address of New Registered Agent:

LAHAGE, H. FRANK
P O BOX 810333
BOCA RATON, FL 33481 US

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: H. FRANK LAHAGE

07/16/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LAHAGE, H. FRANK,
Address: 145 AVE L
City-St-Zip: DELRAY BEACH, FL 33483

Title: V () Delete
Name: LAHAGE, FRANCIS H.,
Address: 145 AVE L
City-St-Zip: DELRAY BEACH, FL 33483

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LAHAGE, H. FRANK
Address: 17490 TIFFANY TRACE
City-St-Zip: BOCA RATON, FL 33487 US

Title: V (X) Change () Addition
Name: LAHAGE, FRANCIS H
Address: 17490 TIFFANY TRACE
City-St-Zip: BOCA RATON, FL 33487 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: H. FRANK LAHAGE

PD

07/16/2004

Electronic Signature of Signing Officer or Director

Date