2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M17778

FILED Apr 15, 2004 Secretary of State

Entity Name: ABI COMPANIES, INC. **Current Principal Place of Business: New Principal Place of Business:** 4301 ANCHOR PLAZA PKWY SUITE 400 TAMPA, FL 33634 **Current Mailing Address: New Mailing Address:** 4301 ANCHOR PLAZA PKWY SUITE 400 TAMPA, FL 33634 US FEI Number: 59-2556119 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HARTER, CRAIG R. HARTER, CRAIG R CFO 4301 ANĆHOR PLAZA PKWY 4301 ANĆHOR PLAZA PKWY SUITE 400 SUITE 400 TAMPA, FL 33634 US TAMPA, FL 33634 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: CRAIG R. HARTER 04/15/2004 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition WILKINS, WILLIAM Name: Name: 4301 ANCHOR PLAZA PKWY STE 400 Address: Address: City-St-Zip: TAMPA, FL 33634 City-St-Zip: Title: Title: () Delete () Change () Addition Name: BOOTH, WILLIAM H. III Name: 4301 ANCHOR PLAZA PKWY STE 400 Address: Address: TAMPA, FL 33634 City-St-Zip: City-St-Zip: Title: Title: STD () Delete () Change () Addition LAUER, F. BRUCE Name: Name: 4301 ANCHOR PLAZA PKWY STE 400 Address: Address: City-St-Zip: TAMPA, FL 33634 City-St-Zip: Title: CFO () Delete Title: () Change () Addition HARTER, CRAIG R. Name: Name: Address: 4301 ANCHOR PLAZA PKWY STE 400 Address: City-St-Zip: TAMPA, FL 33634 City-St-Zip: Title: Title: () Delete () 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.

Name:

Address:

City-St-Zip:

SIGNATURE: CRAIG R. HARTER CFO 04/15/2004

VARSAMES, LOUIS

TAMPA, FL 33634

4301 ANCHOR PLAZA PKWY STE 400

Name:

Address: City-St-Zip: