

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M29978

FILED
May 01, 2004
Secretary of State

Entity Name: 441 PARTNERS, INC.

Current Principal Place of Business:

13688 BRIGHTSTONE ST.
WEST PALM BEACH, FL 33414

New Principal Place of Business:

8268 BLUE CYPRESS DRIVE
LAKE WORTH, FL 33467 US

Current Mailing Address:

13688 BRIGHTSTONE ST.
WEST PALM BEACH, FL 33414

New Mailing Address:

8268 BLUE CYPRESS DRIVE
LAKE WORTH, FL 33467 US

FEI Number: 59-2669632

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PADEN, FRANCES V
13688 BRIGHTSTONE ST
WEST PALM BEACH, FL 33414 US

Name and Address of New Registered Agent:

FLETCHER, CHRISTINE
8268 BLUE CYPRESS DRIVE
LAKE WORTH, FL 33467 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: CHRISTINE FLETCHER

05/01/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FLETCHER, CHRISTINE,
Address: 126 WEYBRIDGE CIRCLE
City-St-Zip: ROYAL PALM BEACH, FL

Title: VD (X) Delete
Name: MACLEOD, KIM,
Address: 3737 NORTH FEDERAL HWY
City-St-Zip: DELRAY BEACH, FL

Title: SD (X) Delete
Name: RUBANO, ELIZABETH,
Address: 11894 SUELLEN CIRCLE
City-St-Zip: WEST PALM BEACH, FL

Title: TD (X) Delete
Name: PADEN, FRANCES V
Address: 13688 BRIGHTSTONE STONE
City-St-Zip: WEST PALM BEACH, FL 33414

Title: D (X) Delete
Name: SUNDERLAND, RONALD,
Address: 851 RAMBLING DRIVE CIR.
City-St-Zip: WEST PALM BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FLETCHER, CHRISTINE,
Address: 8268 BLUE CYPRESS DRIVE
City-St-Zip: LAKE WORTH, FL 33467 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CHRISTINE FLETCHER

PRES

05/01/2004

Electronic Signature of Signing Officer or Director

Date