

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M72549

FILED
Feb 26, 2004
Secretary of State

Entity Name: CRAGAN CAMPELLONE & ASSOCIATES, INC.

Current Principal Place of Business:

6728 EDGEWATER COMMERCE PARKWAY
ORLANDO, FL 32810 US

New Principal Place of Business:

120 EAST ROBINSON STREET
ATTN: KENNETH L. MANN, P.A.
ORLANDO, FL 32801 US

Current Mailing Address:

6728 EDGEWATER COMMERCE PARKWAY
ORLANDO, FL 32810 US

New Mailing Address:

P.O. BOX 551
120 EAST ROBINSON STREET
ORLANDO, FL 328020551 US

FEI Number: 59-2880128

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMPELLONE, RAE ANNE
4928 EASTER CIRCLE
ORLANDO, FL 32808 US

Name and Address of New Registered Agent:

MANN, KENNETH L
120 EAST ROBINSON STREET
C/O KENNETH L. MANN, P.A.
ORLANDO, FL 32801 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: KENNETH L. MANN

02/26/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CAMPELLONE, RAE ANNE,
Address: 4928 EASTER CIRCLE
City-St-Zip: ORLANDO, FL 32808

Title: V (X) Delete
Name: CRAGAN, MICHAEL G.,
Address: 6232 ALBETH RD
City-St-Zip: ORLANDO, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: CAMPELLONE, RAE ANNE
Address: 9409 SUMMER RAIN DRIVE
City-St-Zip: LAS VEGAS, NV 89134

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: RAE ANNE CAMPELLONE

PRES

02/26/2004

Electronic Signature of Signing Officer or Director

Date