

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M80147

FILED  
Mar 30, 2004  
Secretary of State

Entity Name: RAYDON CORPORATION

**Current Principal Place of Business:**

210 FENTRESS BLVD  
DAYTONA BCH, FL 32114 US

**New Principal Place of Business:**

**Current Mailing Address:**

210 FENTRESS BLVD  
DAYTONA BCH, FL 32114 US

**New Mailing Address:**

FEI Number: 59-2891299      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: HOCKNEY, RAYMOND E  
Address: 1406 KERRY CT  
City-St-Zip: PORT ORANGE, FL 32119

Title: C/D ( ) Delete  
Name: ARIEL, DONALD K  
Address: 638 BRECKENRIDGE DRIVE  
City-St-Zip: PORT ORANGE, FL 32127

Title: P/D ( ) Delete  
Name: DONOVAN, DAVID P  
Address: 125 BROOKSIDE DRIVE  
City-St-Zip: PORT ORANGE, FL 32124

Title: S ( ) Delete  
Name: RICE, WILLIAM A  
Address: 526 SUN LAKE DRIVE  
City-St-Zip: PORT ORANGE, FL 32127

Title: D ( ) Delete  
Name: BENEDICT, JAMES M  
Address: 28 BAY POINTE DRIVE  
City-St-Zip: ORMOND BEACH, FL 32174

Title: V ( ) Delete  
Name: OWENS, MARION G  
Address: 660 META LANE  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: C/D (X) Change ( ) Addition  
Name: ARIEL, DONALD K  
Address: 688 BRECKENRIDGE DRIVE  
City-St-Zip: PORT ORANGE, FL 32127

Title: P/D (X) Change ( ) Addition  
Name: DONOVAN, DAVID P  
Address: 125 BROOKSIDE DRIVE  
City-St-Zip: DAYTONA BEACH, FL 32124

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: WILLIAM A. RICE

S

03/30/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date