

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M88322

**FILED
Jan 14, 2004
Secretary of State**

Entity Name: THE SOURCE GROUP OF COMPANIES INC.

Current Principal Place of Business:

116 TUPELO
A
FT. WALTON BEACH, FL 32554 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 461
P.O. BOX 461
FT. WALTON BEACH, FL 32549 US

New Mailing Address:

FEI Number: 59-2897020 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

STROM, LEN
116 TUPELO
SUITE A
FT. WALTON BEACH, FL 32548 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: DP () Delete
Name: STROM, LEN,
Address: 6 LAKESIDE COURT
City-St-Zip: FT. WALTON BEACH, FL

Title: DST () Delete
Name: RABELL, FRANK,
Address: P. O. BOX 461
City-St-Zip: FT. WALTON BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: LEN STROM

DP

01/14/2004

Electronic Signature of Signing Officer or Director

Date