2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010982

Entity Name: MATTHEW2535, INC.

Name:

Address:

City-St-Zip:

MYERS, KATHERINE

3006 ROSEBUD LANE

BRANDON, FL 33511

FILED Jun 21, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 407 RONELE DR. BRANDON, FL 33511 US **Current Mailing Address: New Mailing Address:** 407 RONELE DR BRANDON, FL 33511 US FEI Number: 20-0517700 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MYERS, LARRY W 3006 RÓSEBUD LANE BRANDON, FL 33511 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: CEO () Delete () Change () Addition DEMBOSKI, ROBIN Name: Name: Address: 407 RONELE DR. Address: City-St-Zip: BRANDON, FL 33511 US City-St-Zip: Title: () Delete Title: () Change () Addition Name: MYERS, LARRY Name: Address: 3006 ROSEBUD LANE Address: City-St-Zip: BRANDON, FL 33511 US City-St-Zip: Title: () Delete Title: () Change () Addition DEMBOSKI, THOMAS Name: Name: 407 RONELE DR. Address: Address: City-St-Zip: BRANDON, FL 33511 US City-St-Zip: Title: SEC () Delete Title: () 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 617, 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: LARRY W. MYERS P 06/21/2004