2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003987

Entity Name: DEBT MANAGEMENT CORPORATION

FILED May 10, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
--------------------------------------	----------------------------------

1677 WELLS RD. 350 CORPORATE WAY

SUITE E SUITE 300

ORANGE PARK, FL 32073 ORANGE PARK, FL 32073

New Mailing Address: **Current Mailing Address:**

1677 WELLS RD. 350 CORPORATE WAY

SUITE 300 SUITE E

ORANGE PARK, FL 32073 ORANGE PARK, FL 32073

FEI Number: 59-3404549 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:

MCCLEAN, TOM MCLEAN, TOM 4503 IRVINGTON AVENUE 236 INDÚSTRIAL LOOP ORANGE PARK, FL 32073

SUITE 6 JACKSONVILLE, FL 32210 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: TOM MCLEAN 05/10/2004

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition () Delete

RODRIGUEZ, WILMA E Name: Name: Address: 3727 CONSTANCIA DR. Address:

City-St-Zip: GREEN COVE SPRING, FL 32043 City-St-Zip:

Title: () Delete Title: () Change () Addition

SALAZ, EDWARD Name: Name: Address: 5584-4 TIMUQUAMA RD. Address: City-St-Zip: JACKSONVILLE, FL 32210 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

RODRIGUEZ, JOSE Name: RODRIGUEZ, JOSE Name: 3727 CONSTANCIA DRIVE Address: 7457-1 103RD ST. Address:

City-St-Zip: JACKSONVILLE, FL 32210 City-St-Zip: GREEN COVE SPRINGS, FL 32043

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.

SIGNATURE: JOSE RODRIGUEZ D 05/10/2004