


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 06, 2004 8:00 am
Secretary of State

07-06-2004 90117 022 ****61.25

DOCUMENT # N96000004557	
1. Entity Name THE MANUFACTURING LEADERSHIP COUNCIL, INC.	

Principal Place of Business 3 BLOCKHOUSE COURT ORMOND BEACH, FL 32174-3020	Mailing Address 3 BLOCKHOUSE COURT ORMOND BEACH, FL 32174-3020
--	--



07012004 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-3409907	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent FIFER, LOU 3 BLOCKHOUSE COURT ORMOND BEACH, FL 32174-3020

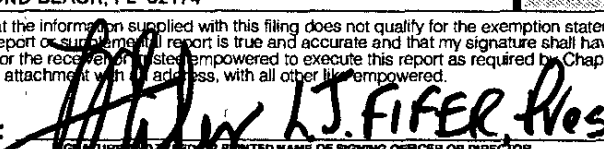
DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE:  L.J. FIFER, Pres.	DATE: 7/1/04

Filing Fee is \$61.25 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	--

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MYERS, MIKE 100 WHALER WAY EDGEWATER, FL 32141
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C MCGRANE, MARK 12 SOUTHLAND ROAD ORMOND BEACH, FL 32174
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SPERBER, PERRY 225 FENTRESS BLVD DAYTONA BEACH, FL 32114
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MADORE, MARK 5612 JOHNSON LAKE ROAD DELEON SPRINGS, FL 32130
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HECHLER, ROBERT 308 OLD COUNTY ROAD EDGEWATER, FL 32132
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD FIFER, LOU 3 BLOCKHOUSE ORMOND BEACH, FL 32174

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE:  L.J. FIFER, Pres.	DATE: 7/1/04 Designated Phone #: 386/673-0505