

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000027061

FILED  
Apr 30, 2004  
Secretary of State

Entity Name: THE MAIN EXCHANGE, INC.

## Current Principal Place of Business:

124 S. WARFIELD AVE  
VENICE, FL 34292

## New Principal Place of Business:

## Current Mailing Address:

1708 WAHRF ROAD  
SARASOTA, FL 34231

## New Mailing Address:

124 S. WARFIELD AVE  
SARASOTA, FL 34292

FEI Number: 65-0993961

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HIBBS, KIMBERLY F  
1708 WAHRF ROAD  
SARASOTA, FL 34231

## 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: CONNER, CRANE  
Address: 124 WARFIELD AVE  
City-St-Zip: VENICE, FL 34292

Title: D ( ) Delete  
Name: HIBBS, KIMBERLY F  
Address: 1708 WHARF RD  
City-St-Zip: SARASOTA, FL 34231

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: CONNER, CRAIG  
Address: 124 WARFIELD AVE  
City-St-Zip: VENICE, FL 34292

Title: D (X) Change ( ) Addition  
Name: ZINSER, KIMBERLY F  
Address: 1708 WHARF RD  
City-St-Zip: SARASOTA, FL 34231

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: KIMBERLY ZINSER

D

04/30/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date