2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000067689

Entity Name: ADVOCATE BUSINESS SERVICES, INC.

FILED Apr 08, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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3149 N. PONCE DE LEON BLVD 88 RIBERIA STREET

STE #9 STE #250

SAINT AUGUSTINE, FL 32084 SAINT AUGUSTINE, FL 32084

Current Mailing Address: New Mailing Address:

3149 N. PONCE DE LEON BLVD 975 OXFORD DRIVE

STE #9 SAINT AUGUSTINE, FL 32084 SAINT AUGUSTINE, FL 32084

FEI Number: 59-3659231 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:

MCGINTY, ROBERT P

1401 WINDJEMMER LANE

SAINT AUGUSTINE, FL 32084

MCGINTY, ROBERT P

975 OXFORD DRIVE

SAINT AUGUSTINE, FL 32084

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: 04/08/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 MCGINTY, ROBERT P
 Name:
 MCGINTY, ROBERT P

 Address:
 9680 DEER RUN DRIVE
 Address:
 975 OXFORD DRIVE

 City-St-Zip:
 PONTE VEDRA BEACH, FL 32082
 City-St-Zip:
 SAINT AUGUSTINE, FL 32084

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

 Name:
 Name:
 MCGINTY, LYNN M

 Address:
 Address:
 975 OXFORD DRIVE

 City-St-Zip:
 City-St-Zip:
 SAINT AUGUSTINE, FL 32084

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: ROBERT P MCGINTY PRES 04/08/2004