2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000071515

Entity Name: CAY LOGIC CORP

City-St-Zip:

BRADENTON, FL 34203 US

FILED Jan 15, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 888 EAST LAS OLAS BLVD. #700 FORT LAUDERDALE, FL 33301 **Current Mailing Address: New Mailing Address:** 888 EAST LAS OLAS BLVD. #700 FORT LAUDERDALE, FL 33301 FEI Number: 65-1026990 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: FEINSTEIN, MICHAEL L 888 EAST LAS OLAS BOULEVARD SUITE 700 FORT LAUDERDALE, FL 33301 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition HULSART, CLIFFORD V. PRES Name: Name: 3334 49TH AVENUE EAST Address: Address: BRADENTON, FL 34203 US City-St-Zip: City-St-Zip: MRS. Title: Title: () Delete () Change () Addition Name: HULSART, JOANNE M TREAS. Name: 3334 49TH AVENUE EAST Address: Address: BRADENTON, FL 34203 US City-St-Zip: City-St-Zip: Title: () Delete Title: MRS () Change () Addition RATCHFORD, CAROL A PRES. Name: Name: 19 WESTWOODS ROAD Address: Address: City-St-Zip: RED HOOK, NY 12571 US City-St-Zip: Title: () Delete Title: () Change () Addition RATCHFORD, JOSEPH A V. PRES Name: Name: Address: 19 WESTWOODS ROAD Address: City-St-Zip: RED HOOK, NY 12571 US City-St-Zip: Title: MRS. Title: () Delete () Change () Addition HULSART, JOANNE M SEC. Name: Name: 3334 49TH AVENUE EAST Address: Address:

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.

City-St-Zip:

SIGNATURE: JOSEPH A RATCHFORD VP 01/15/2004