2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000079984

Entity Name: TRUSTMARK PLAN ADMINISTRATION, INC.

FILED Mar 08, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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13680 NW 5TH STREET SUITE 200

SUNRISE, FL 3323

Current Mailing Address: New Mailing Address:

13680 NW 5TH STREET SUITE 200

SUNRISE, FL 3323 FEI Number: 65-1032091

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name

US

Name and Address of New Registered Agent:

1560 SAWGRASS CORPORATE PARKWAY

1560 SAWGRASS CORPORATE PARKWAY

HAYMOND, STEVEN 12655 NW 17 PLACE

12655 NW 17 PLACE CORAL SPRINGS, FL 33071

71

HAYMON, STEVEN 12655 NW 17 PLACE

4TH FLOOR SUITE 465

4TH FLOOR SUITE 465

SUNRISE, FL 33323

SUNRISE, FL 33323

CORAL SPRINGS, FL 33071 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: STEVEN HAYMON

03/08/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SCHWEITZER, AMNON

Address: 9810 NW 10 CT
City-St-Zip: PLANTATION, FL 33322

Title: D () Delete

Name: HAYMON, STEVEN

Address: 12655 NW 17TH PLACE

Address: 12655 NW 17TH PLACE
City-St-Zip: CORAL SPRINGS, FL 33071

Title: () Change () Addition

Name: Address:

Address: City-St-Zip:

Title: () Change () Addition Name:

Address: City-St-Zip:

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: STEVEN HAYMON D 03/08/2004