

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 12, 2004 8:00 am**  
**Secretary of State**

02-12-2004 90035 007 \*\*\*158.75

**DOCUMENT # P00000081423**

1. Entity Name

LIBERTY ASSET MANAGEMENT, INC.



Principal Place of Business  
1180 GULF BLVD #1006  
CLEARWATER FL 33767

Mailing Address  
1180 GULF BLVD #1006  
CLEARWATER FL 33767

2. Principal Place of Business

430 JASMINE WAY  
Suite, Apt. #, etc.

3. Mailing Address

430 JASMINE WAY  
Suite, Apt. #, etc.



MOORE CR2E034 (11/03)

City & State  
CLEARWATER, FLORIDA

Zip  
33756

Country  
USA

City & State  
CLEARWATER, FLORIDA

Zip  
33756

Country  
USA

4. FEI Number  
59-3668599

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MARSH, ED  
1180 GULF BLVD #1006  
CLEARWATER FL 33767

7. Name and Address of New Registered Agent

Name ED MARSH  
Street Address (P.O. Box Number is Not Acceptable)  
430 JASMINE WAY  
City CLEARWATER FL Zip Code 33756

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 ED MARSH ED MARSH 7 FEBRUARY, 2004  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete  
NAME MARSH, ED  
STREET ADDRESS 1180 GULF BLVD #1006  
CITY-ST-ZIP CLEARWATER FL 33767

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PRESIDENT ☒ Change ☐ Addition  
NAME ED MARSH  
STREET ADDRESS 430 JASMINE WAY  
CITY-ST-ZIP CLEARWATER, FLORIDA 33756

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 607, 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: ED MARSH ED MARSH, PRESIDENT 7 FEB 2004 (727) 446-7125  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #