2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 26, 2004
Secretary of State

DOCUMENT# P00000088063

Entity Name: FLORIDA PROPERTY CONSULTANTS GROUP, INC.

Current Principal Place of Business:

4830 NW 43RD ST., #176
GAINESVILLE, FL 32606

New Principal Place of Business:

2931 KERRY FOREST PARKWAY
SUITE 201
TALLAHASSEE, FL 32309

Current Mailing Address:

4830 NW 43RD ST., #176
GAINESVILLE, FL 32606

New Mailing Address:

2931 KERRY FOREST PARKWAY
SUITE 201
TALLAHASSEE, FL 32309

FEI Number: 59-3686705 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TEMPLIN, JON H
3600 NW 43RD STREET
SUITE D-2
GAINESVILLE, FL 32606

Name and Address of New Registered Agent:

TRUNCONE, NICHOLAS
2931 KERRY FOREST PARKWAY
SUITE 201
TALLAHASSEE, FL 32309

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: NICHOLAS TRUNCONE 07/26/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: TEMPLIN, JON H
Address: 4830 NW 43RD ST., #176
City-St-Zip: GAINESVILLE, FL 32606

Title: D ( ) Delete
Name: CRAHAN, JACK
Address: 1255-D SUN TERRACE CIRCLE
City-St-Zip: PT. ST. LUCIE, FL 34986

Title: D ( ) Delete
Name: TRUNCONE, NICK
Address: 2618 SADIE LANE
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition
Name: TEMPLIN, JON H
Address: 4830 NW 43RD ST., #176
City-St-Zip: GAINESVILLE, FL 32606

Title: TREA (X) Change ( ) Addition
Name: CRAHAN, JACK
Address: 202 W. CHANCERY LANE
City-St-Zip: DELAND, FL 32724

Title: PRES (X) Change ( ) Addition
Name: TRUNCONE, NICK
Address: 2618 SADIE LANE
City-St-Zip: TALLAHASSEE, FL 32312

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: NICHOLAS TRUNCONE PRES 07/26/2004
Electronic Signature of Signing Officer or Director Date