2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2004
Secretary of State

DOCUMENT# P00000090717

Entity Name: ADAM J. THIELEN III, C.L.U., INC.

Current Principal Place of Business:

C/O ADAM J. THIELEN, III
PO BOX 845
TAVARES, FL 327780845 US

New Principal Place of Business:

LAKE COUNTY FARM BUREAU
30241 STATE ROAD 19
TAVARES, FL 327784259 US

Current Mailing Address:

PO BOX 845
TAVARES, FL 327780845 US

New Mailing Address:

FEI Number: 59-3673400 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PAYNE, MARK C
620 E TWIGGS ST
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

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:

Title: D ( ) Delete
Name: THIELEN, ADAM J III
Address: 30241 STATE ROAD 19
City-St-Zip: TAVARES, FL 327784259 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ADAM J THIELEN III D 01/06/2004

Electronic Signature of Signing Officer or Director — Date