

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000094144

FILED
Apr 28, 2004
Secretary of State

Entity Name: THE APOS GROUP, INCORPORATED

Current Principal Place of Business:

700 COOKMAN AVENUE
ORLANDO, FL 32855

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 555912
ORLANDO, FL 32855

New Mailing Address:

FEI Number: 59-3689179

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POWELL, SHELLY H
700 COOKMAN AVE
ORLANDO, FL 32805 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: MTS () Delete
Name: POWELL, SHELLY
Address: 700 COOKMAN AVE
City-St-Zip: ORLANDO, FL 32805

Title: D () Delete
Name: GRAHAM, CYNTHIA H
Address: P.O. BOX 618638
City-St-Zip: ORLANDO, FL 32861

Title: D () Delete
Name: HENSON, JENORIA
Address: 757 SOUTH ORANGE AVE
City-St-Zip: ORLANDO, FL 32801

Title: PC () Delete
Name: POWELL, ANDREW
Address: 700 COOKMAN AVE.
City-St-Zip: ORLANDO, FL 32805

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
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: ANDREW POWELL

PC

04/28/2004

Electronic Signature of Signing Officer or Director

Date