2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004
Secretary of State

DOCUMENT# P00000095849

Entity Name: FINFROCK DESIGN, INC.

Current Principal Place of Business:

2400 APOPKA BLVD
APOPKA, FL 32703

New Principal Place of Business:

Current Mailing Address:

PO BOX 607754
ORLANDO, FL 328607754

New Mailing Address:

FEI Number: 59-3679281 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FINFROCK, ROBERT D
2400 APOPKA BLVD
APOPKA, FL 32703

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: PD ( ) Delete
Name: FINFROCK, ROBERT D
Address: 4040 TIMBERLANE AVENUE
City-St-Zip: ORLANDO, FL 32804

Title: V ( ) Delete
Name: FINFROCK, ALLEN R
Address: 825 GOLFVIEW STREET
City-St-Zip: ORLANDO, FL 32804

Title: V ( ) Delete
Name: CUNNINGHAM, THOMAS E
Address: 350 GOLF BROOK CIRCLE 3200
City-St-Zip: LONGWOOD, FL 32779

Title: TS ( ) Delete
Name: DOAN, DEBRA K
Address: 1561 LYNDALE BLVD
City-St-Zip: MAITLAND, FL 32751

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change ( ) Addition
Name: FINFROCK, ALLEN R
Address: 2400 APOPKA BLVD
City-St-Zip: APOPKA, FL 32703

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: DEBRA K DOAN TS 04/19/2004

Electronic Signature of Signing Officer or Director — Date