

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000102437

FILED  
Apr 01, 2004  
Secretary of State

Entity Name: INDEPENDENT CONSULTANTS, INC.

## Current Principal Place of Business:

1964 SW HUNTERS CLUB WAY  
PALM CITY, FL 34990

## New Principal Place of Business:

390 SW SOUTH RIVER DR.  
#207  
STUART, FL 34997

## Current Mailing Address:

1964 SW HUNTERS CLUB WAY  
PALM CITY, FL 34990

## New Mailing Address:

P.O. BOX 1101  
STUART, FL 34995

FEI Number: 59-3682979

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RIGABAR, SUSAN M  
1964 SW HUNTERS CLUB WAY  
PALM CITY, FL 34990

## Name and Address of New Registered Agent:

RIGABAR, SUSAN M  
390 SW SOUTH RIVER DR.  
#207  
STUART, FL 34997

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:

04/01/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PS ( ) Delete  
Name: RIGABAR, SUSAN M  
Address: 1964 SW HUNTERS CLUB WAY  
City-St-Zip: PALM CITY, FL 34990

Title: VT ( ) Delete  
Name: RIGABAR, HENRY R  
Address: 1964 SW HUNTERS CLUB WAY  
City-St-Zip: PALM CITY, FL 34990

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change ( ) Addition  
Name: RIGABAR, SUSAN M  
Address: 390 SW SOUTH RIVER DR.  
City-St-Zip: STUART, FL 34997

Title: VT (X) Change ( ) Addition  
Name: RIGABAR, HENRY R  
Address: 390 SW SOUTH RIVER DR.  
City-St-Zip: STUART, FL 34997

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: SUSAN M. RIGABAR

PS

04/01/2004

Electronic Signature of Signing Officer or Director

Date