

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000116366

FILED  
Apr 30, 2004  
Secretary of State

Entity Name: DEMIURGIC CONSULTING GROUP, INC.

## Current Principal Place of Business:

1657 SW BURLINGTON ST  
PORT SAINT LUCIE, FL 34984

## New Principal Place of Business:

6816 NW ABADAN STREET  
PORT SAINT LUCIE, FL 34983

## Current Mailing Address:

PO BOX 880151  
PORT SAINT LUCIE, FL 349880151

## New Mailing Address:

FEI Number: 65-1062252

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PEAVLEY, CHRISTOFER R  
1657 SW BURLINGTON ST  
PORT SAINT LUCIE, FL 34984 US

## Name and Address of New Registered Agent:

PEAVLEY, CHRISTOFER R  
6816 NW ABADAN STREET  
PORT SAINT LUCIE, FL 34983 US

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:

04/30/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DCS ( ) Delete  
Name: ADAMS, JACK E  
Address: 1657 SW BURLINGTON ST  
City-St-Zip: PORT SAINT LUCIE, FL 34984

Title: DPT ( ) Delete  
Name: PEAVLEY, CHRISTOFER R  
Address: 1657 SW BURLINGTON ST  
City-St-Zip: PORT SAINT LUCIE, FL 34984

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DCS (X) Change ( ) Addition  
Name: ADAMS, JACK E  
Address: 6816 NW ABADAN STREET  
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: DPT (X) Change ( ) Addition  
Name: PEAVLEY, CHRISTOFER R  
Address: 6816 NW ABADAN STREET  
City-St-Zip: PORT SAINT LUCIE, FL 34983

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: JACK E ADAMS

DCS

04/30/2004

Electronic Signature of Signing Officer or Director

Date