2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000117840

Entity Name: G. ROBINSON MANAGEMENT OF FLORIDA, INC.

Current Principal Place of Business:	**New Principal Place of Business:**
164 BAYMOUNT DR STATESVILLE, NC 28625	

Current Mailing Address:	**New Mailing Address:**
164 BAYMOUNT DR STATESVILLE, NC 28625	

FEI Number: 56-2226685   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
C.T. CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD PLANATATION, FL 33324 US	ROBINSON, GARY 8001 HARWOOD C DEERFIELD BEACH, FL 33442 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: GARY ROBINSON   02/10/2004
_____   _____
            Electronic Signature of Registered Agent   Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title:	PRES ( ) Delete	Title:	( ) Change ( ) Addition
Name:	ROBINSON, GARY	Name:	
Address:	164 BAYMOUNT DRIVE	Address:	
City-St-Zip:	STATESVILLE, NC 28625	City-St-Zip:	
Title:	VP ( ) Delete	Title:	( ) Change ( ) Addition
Name:	ROBINSON, ROSE	Name:	
Address:	164 BAYMOUNT DRIVE	Address:	
City-St-Zip:	STATESVILLE, NC 28625	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: GARY ROBINSON   PRES   02/10/2004
_____   _____   _____
            Electronic Signature of Signing Officer or Director   Date