

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000063001

FILED  
Sep 02, 2004  
Secretary of State

Entity Name: ASMARA OF FLORIDA IV, INC.

## Current Principal Place of Business:

10108 INDUSTRIAL DRIVE  
PINEVILLE, NC 28134 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 410747  
CHARLOTTE, NC 28241

## New Mailing Address:

FEI Number: 59-3736243

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ABDALLAH, BENJAMIN W  
6278 AVENTURA DRIVE  
SARASOTA, FL 34241 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: QUIRK, ERIKA W  
Address: 4140 NW 27 LANE STE F  
City-St-Zip: GAINESVILLE, FL 32606

Title: VPS ( ) Delete  
Name: ELLISON, LEE E  
Address: 10108 INDUSTRIAL DRIVE  
City-St-Zip: PINEVILLE, NC 28134 US

Title: PCOB ( ) Delete  
Name: BELLAMY, W. REVEL  
Address: 10108 INDUSTRIAL DRIVE  
City-St-Zip: PINEVILLE, NC 28134 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change ( ) Addition  
Name: MUSSELMAN, GARY  
Address: 10108 INDUSTRIAL DRIVE  
City-St-Zip: PINEVILLE, NC 28134

Title: SEC (X) Change ( ) Addition  
Name: CALKINS, KAY  
Address: 10108 INDUSTRIAL DRIVE  
City-St-Zip: PINEVILLE, NC 28134 US

Title: COB (X) Change ( ) Addition  
Name: CALKINS, DAVID  
Address: 10108 INDUSTRIAL DRIVE  
City-St-Zip: PINEVILLE, NC 28134 US

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 MUSSELMAN

CEO

09/02/2004

Electronic Signature of Signing Officer or Director

Date