## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000078127

COWART, WILLIAM P

TAMPA, FL 33619

3914 U.S. HIGHWAY 301 NORTH

Name:

Address: City-St-Zip:

FILED Jan 05, 2004 Secretary of State

Entity Name: CMC DESIGN GROUP, INC. **Current Principal Place of Business: New Principal Place of Business:** 3914 U.S. HIGHWAY 301 NORTH SUITE 200 TAMPA, FL 33619 **New Mailing Address: Current Mailing Address:** 3914 U.S. HIGHWAY 301 NORTH SUITE 200 TAMPA, FL 33619 FEI Number: 59-3738498 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COWART, WILLIAM P 3914 U.S. HWY 301 N. STE 200 TAMPA, FL 33619 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition MACIAS, JON-ERIC Name: Name: 3914 U.S. HIGHWAY 301 NORTH Address: Address: City-St-Zip: TAMPA, FL 33619 City-St-Zip: Title: ٧S Title: () Delete () Change () Addition Name: LOTWICK, GEORGE WILBUR JR Name: 3914 U.S. HIGHWAY 301 NORTH Address: Address: TAMPA, FL 33619 City-St-Zip: City-St-Zip: Title: Title: ( ) Delete () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: WILLIAM P. COWART VD 01/05/2004