

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000081096

FILED  
Feb 24, 2004  
Secretary of State

Entity Name: CENTRAL PUBLISHING GROUP INC.

## Current Principal Place of Business:

3186 MICHAELS CT  
GREEN COVE SPRINGS, FL 32043

## New Principal Place of Business:

687 ARTHUR MOORE DRIVE  
GREEN COVE SPRINGS, FL 32043

## Current Mailing Address:

3186 MICHAELS CT  
GREEN COVE SPRINGS, FL 32043

## New Mailing Address:

PO BOX 9510  
FLEMING ISLAND, FL 32006

FEI Number: 59-3737986

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KNIGHT, BRIAN S  
3186 MICHAELS CT  
GREEN COVE SPRINGS, FL 32043

## Name and Address of New Registered Agent:

KNIGHT, BRIAN S  
687 ARTHUR MOORE DRIVE  
GREEN COVE SPRINGS, FL 32043

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:

02/24/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: KNIGHT, BRIAN S  
Address: 3186 MICHAELS CT  
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: V ( ) Delete  
Name: WARREN, LOWELL A  
Address: 642 TRAILWOOD DR  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: V ( ) Delete  
Name: JONES, STEVE  
Address: 770 OLD STONE DR  
City-St-Zip: HIGHLANDS RANCH, CO 80126

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: KNIGHT, BRIAN S  
Address: 687 ARTHUR MOORE DRIVE  
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: V (X) Change ( ) Addition  
Name: JONES, STEVE  
Address: 17552 E JAMISON AVE  
City-St-Zip: CENTENNIAL, CO 80016

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: BRIAN S KNIGHT

P

02/24/2004

Electronic Signature of Signing Officer or Director

Date