

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000092285

FILED
Jan 13, 2004
Secretary of State

Entity Name: DEBT MANAGEMENT CENTER, INC.

Current Principal Place of Business:

8601 4TH ST. NORTH, STE. 200
ST. PETERSBURG, FL 33702

New Principal Place of Business:

8601 4TH ST. NORTH, STE. 300
ST. PETERSBURG, FL 33702

Current Mailing Address:

8601 4TH ST. NORTH, STE. 200
ST. PETERSBURG, FL 33702

New Mailing Address:

8601 4TH ST. NORTH, STE. 300
ST. PETERSBURG, FL 33702

FEI Number: 59-3745253

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TUCCARONE, CHRISTOPHER M
8601 4TH STREET NORTH SUITE 200
SAINT PETERSBURG, FL 33702 US

Name and Address of New Registered Agent:

TUCCARONE, CHRISTOPHER M
8601 4TH STREET NORTH SUITE 300
SAINT PETERSBURG, FL 33702 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:

01/13/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TUCCARONE, CHRISTOPHER M
Address: 8601 4TH ST. NORTH, STE. 302
City-St-Zip: ST. PETERSBURG, FL 33702

Title: D () Delete
Name: TUCCARONE, MARLENE
Address: 8601 4TH ST. NORTH, STE. 302
City-St-Zip: ST. PETERSBURG, FL 33702

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: TUCCARONE, CHRISTOPHER M MR
Address: 4515 WEST LEONA STREET
City-St-Zip: TAMPA, FL 33629

Title: CFO (X) Change () Addition
Name: SUNDQUIST, MARLENE MSS
Address: 371 CHANNELSIDE WALKWAY #1103
City-St-Zip: TAMPA, FL 33602

Title: COO () Change (X) Addition
Name: DE LE TORRE, AADONIA MRS
Address: 4512 WEST LEONA STREET
City-St-Zip: TAMPA, FL 33629

Title: CEO () Change (X) Addition
Name: CALLAHAN, BRIAN MR
Address: 3310 EAST SEVILLA CIRCLE
City-St-Zip: TAMPA, FL 33629

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: MARLENE SUNDQUIST

CFO

01/13/2004

Electronic Signature of Signing Officer or Director

Date