

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000116039

FILED
May 01, 2004
Secretary of State

Entity Name: MANCINI & CO. ADMINISTRATIVE & PARALEGAL SUPPORT SERVICES, INC.

Current Principal Place of Business:

10001 TAMIAMI TRAIL NORTH
SUITE 114
NAPLES, FL 34108

New Principal Place of Business:

10001 TAMIAMI TRAIL NORTH
SUITE 118
NAPLES, FL 34108

Current Mailing Address:

10001 TAMIAMI TRAIL NORTH
SUITE 114
NAPLES, FL 34108

New Mailing Address:

10001 TAMIAMI TRAIL NORTH
SUITE 118
NAPLES, FL 34108

FEI Number: 22-3550044

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C. RICHARD MANCINI, ESQUIRE
4001 TAMIAMI TRAIL NORTH
SUITE 330
NAPLES, FL 34103

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MANCINI, TRACEY A
Address: 10001 TAMIAMI TRAIL NORTH #114
City-St-Zip: NAPLES, FL 34108

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MANCINI, TRACEY A
Address: 10001 TAMIAMI TRAIL NORTH #118
City-St-Zip: NAPLES, FL 34108

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: TRACEY A. MANCINI

D

05/01/2004

Electronic Signature of Signing Officer or Director

Date