

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000027876

Entity Name: MANAGEMENT ETC., INC.

FILED  
Apr 26, 2004  
Secretary of State

## Current Principal Place of Business:

739 NATALIE LANE  
PALM HARBOR, FL 346834237

## New Principal Place of Business:

## Current Mailing Address:

739 NATALIE LANE  
PALM HARBOR, FL 346834237

## New Mailing Address:

FEI Number: 75-3025059

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SYLVESTER, MICHAEL  
739 NATALIE LANE  
PALM HARBOR, FL 346834237 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete  
Name: SYLVESTER, MICHAEL  
Address: 739 NATALIE LANE  
City-St-Zip: PALM HARBOR, FL 346834237

Title: DVS ( ) Delete  
Name: SYLVESTER, NOEL  
Address: 739 NATALIE LANE  
City-St-Zip: PALM HARBOR, FL 346834237

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: NOEL SYLVESTER

DVS

04/26/2004

Electronic Signature of Signing Officer or Director

Date