

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000036588

FILED
Jan 13, 2004
Secretary of State

Entity Name: THE M2 NORTHWEST FLORIDA CORPORATION

Current Principal Place of Business:

8160 LILLIAN HIGHWAY
PENSACOLA, FL 32506

New Principal Place of Business:

1088 BLACK WALNUT TRAIL
PENSACOLA, FL 32514

Current Mailing Address:

8160 LILLIAN HIGHWAY
PENSACOLA, FL 32506

New Mailing Address:

1765 E. NINE MILE ROAD
SUITE ONE BOX 400
PENSACOLA, FL 32514

FEI Number: 04-3652879

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOFFMAN, CHARLES L JR., ESQ
226 S. PALAFOX PLACE
9TH FLOOR, SEVILLE TOWER
PENSACOLA, FL 32502 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: MR () Delete
Name: MILLER, DAVID T PRESIDE
Address: 8252 LODE STAR AVE
City-St-Zip: PENSACOLA, FL 32514

Title: MR () Delete
Name: MACHADO, EVANDRO B VICEPRE
Address: 8252 LODE STAR AVE
City-St-Zip: PENSACOLA, FL 32514

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR (X) Change () Addition
Name: MILLER, DAVID T PRESIDE
Address: 1765 E. NINE MILE ROAD STE. ONE BOX 400
City-St-Zip: PENSACOLA, FL 32514

Title: MR (X) Change () Addition
Name: MACHADO, EVANDRO B VICEPRE
Address: 1765 E. NINE MILE ROAD STE. ONE BOX 400
City-St-Zip: PENSACOLA, FL 32514

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: DAVID MILLER

PRES

01/13/2004

Electronic Signature of Signing Officer or Director

Date