## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000044595

City-St-Zip: PLANTATION, FL 33309

Entity Name: DONNER MANAGEMENT OF S.E. FLORIDA, INC.

FILED Jul 09, 2004 Secretary of State

| Current Principal Place of Business:  |  |   | New Principal Place                | New Principal Place of Business:             |  |
|---|--|---|------------------------------------|--|--|
|   | SUNRISE BLVE<br>TION, FL 33309               |   |                                    |  |  |
| Current Mailing Address:  |  |   | New Mailing Address                | New Mailing Address:                         |  |
|   | SUNRISE BLVE<br>TION, FL 33309               |   |                                    |  |  |
| FEI Numbe   | er: 04-3684959                               | FEI Number Applied For()  | FEI Number Not Applicable ( )      | Certificate of Status Desired ( )            |  |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent: |  |   |                                    |  |  |
| 8551 W. S   | R, JEFFREY<br>SUNRISE BLVE<br>TION, FL 33309 |   |                                    |  |  |
|   | e named entity<br>te of Florida.             | submits this statement for the  | purpose of changing its registered | d office or registered agent, or both,       |  |
| SIGNATL   | JRE:   |   |                                    |  |  |
|   | Electron                                     | nic Signature of Registered Ag  | ent                                | Date   |  |
|   |  | 3(2)(b), F.S., the corporation did n<br>g Trust Fund Contribution (  ). | ot receive the prior notice.       |  |  |
| OFFICER   | RS AND DIREC                                 | TORS:   | ADDITIONS/CHANGE                   | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:   | DONNER, JEF                                  | ) Delete<br>FREY<br>USE BLVD STE 209                                    | Title:<br>Name:<br>Address:        | ( ) Change ( ) Addition                      |  |

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: JEFFREY DONNER PRES 07/09/2004