2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000053146

Entity Name: DAY FONTAINE SPIERS, INC.

FILED Apr 28, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

200 E. LAS OLAS BLVD. 1510 SE 17TH STREET

SUITE 1660 SUITE 300

FORT LAUDERDALE, FL 33301 FORT LAUDERDALE, FL 33316

Current Mailing Address: New Mailing Address:

200 E. LAS OLAS BLVD. 1510 SE 17TH STREET

SUITE 1660 SUITE 300

FORT LAUDERDALE, FL 33301 FORT LAUDERDALE, FL 33316

FEI Number: 04-3666802 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

DY, ROBERT J DAY, J. ROBERT 1510 SE 17TH STREET 200 E LAS OLAS

FORT LAUDERDALE, FL 33301 US SUITE 300 FORT LAUDERDALE, FL 33316 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: J. ROBERT DAY 04/28/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition SPIERS, DAVID G Name: Name: SPIERS, DAVID G

200 E LAS OLAS #1660 1510 SE 17TH STREET, SUITE 300 Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33301 City-St-Zip: FORT LAUDERDALE, FL 33316

Title: Title: () Delete (X) Change () Addition

Name: DAY, ROBERT J Name: DAY, J. ROBERT

200 E LAS OLAS #1660 1510 SE 17TH STREET, SUITE 300 Address: Address: FORT LAUDERDALE, FL 33301 FORT LAUDERDALE, FL 33316 City-St-Zip: City-St-Zip:

Title: Title: (X) Change () Addition () Delete TS

FONTAINE, RAYMOND FONTAINE, RAYMOND Name: Name:

200 E LAS OLAS #1660 1510 SE 17TH STREET, SUITE 300 Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33301 City-St-Zip: FORT LAUDERDALE, FL 33316

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.

Ρ SIGNATURE: DAVID G. SPIERS 04/28/2004