

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000103319

Entity Name: MATHEWS & MANNS, INC.

FILED
Jan 16, 2004
Secretary of State

Current Principal Place of Business:

7668 S TAMIAMI TRAIL
SARASOTA, FL 34231

New Principal Place of Business:

Current Mailing Address:

7668 S TAMIAMI TRAIL
SARASOTA, FL 34231

New Mailing Address:

FEI Number: 65-1175413

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PADEREWSKI, ALEXANDER G
1834 MAIN STREET
SARASOTA, FL 34236

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: MANNS, R.J.
Address: 7344 REGINA ROYALE
City-St-Zip: SARASOTA, FL 34238

Title: D () Delete
Name: MANNS, LINDA M
Address: 7344 REGINA ROYALE
City-St-Zip: SARASOTA, FL 34238

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MANNS, R.J.
Address: 5003 BAYSTATE RD
City-St-Zip: PALMETTO, FL 34221

Title: VP (X) Change () Addition
Name: MANNS, LINDA M
Address: 5003 BAYSTATE
City-St-Zip: PALMETTO, FL 34221

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: R.J. MANNS

P

01/16/2004

Electronic Signature of Signing Officer or Director

_____ Date