2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2004
Secretary of State

DOCUMENT# P03000005171

Entity Name: ASSOCIATION MANAGEMENT, INC.

Current Principal Place of Business:

618 NW 13TH STREET
BOCA RATON, FL 33486 US

New Principal Place of Business:

170 NE 2ND STREET
4292
BOCA RATON, FL 33432 US

Current Mailing Address:

P.O. BOX 4292
BOCA RATON, FL 33429 US

New Mailing Address:

FEI Number: 51-0445533 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOGUE, DOUGLAS M
P.O. BOX 4292
BOCA RATON, FL 33429 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: P ( ) Delete
Name: LOGUE, DOUGLAS M
Address: 618 NW 13TH STREET
City-St-Zip: BOCA RATON, FL 33486 US

Title: S ( ) Delete
Name: MOORE, CLINTON
Address: 618 NW 13TH STREET
City-St-Zip: BOCA RATON, FL 33486 US

Title: D ( ) Delete
Name: LOGUE, BRANDON D
Address: 618 NW 13TH STREET
City-St-Zip: BOCA RATON, FL 33486 US

Title: D ( ) Delete
Name: WALLING, C L
Address: 618 NW 13TH STREET
City-St-Zip: BOCA RATON, FL 33486 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: LOGUE, DOUGLAS M
Address: 170 NE 2ND STREET
City-St-Zip: BOCA RATON, FL 33432 US

Title: S (X) Change ( ) Addition
Name: MOORE, CLINTON
Address: 170 NE 2ND STREET
City-St-Zip: BOCA RATON, FL 33432 US

Title: D (X) Change ( ) Addition
Name: LOGUE, BRANDON D
Address: 170 NE 2ND STREET
City-St-Zip: BOCA RATON, FL 33432 US

Title: VP (X) Change ( ) Addition
Name: WALLING, C L
Address: 170 NE 2ND STREET
City-St-Zip: BOCA RATON, FL 33432 US

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: CLINTON MOORE S 02/13/2004

Electronic Signature of Signing Officer or Director Date