
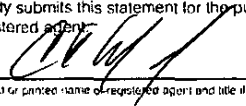
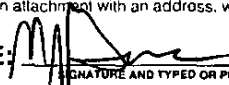


# 2004 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

04 AUG 20 AM 9:28

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

<b>DOCUMENT # P03000013956</b>			
1. Entity Name <b>GARDNER CONSULTING, INC.</b>			
Principal Place of Business <b>8110 SABAL OAK LANE JACKSONVILLE, FL 32256</b>		Mailing Address <b>8110 SABAL OAK LANE JACKSONVILLE, FL 32256</b>	
2. Principal Place of Business <b>25 Harmony School Road</b> Suite, Apt. #, etc.		3. Mailing Address <b>25 Harmony School Road</b> Suite, Apt. #, etc.	
City & State <b>Flemington, New Jersey</b>		City & State <b>Flemington, New Jersey</b>	
Zip <b>08822</b>	Country <b>USA</b>	Zip <b>08822</b>	Country <b>USA</b>
4. FEI Number <b>59-3766677</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent <b>GARDNER, MICHAEL J 8110 SABAL OAK LANE JACKSONVILLE, FL 32256</b>		7. Name and Address of New Registered Agent Name <b>Charles R. Curley, Jr.</b> Street Address (P.O. Box Number is Not Acceptable) <b>1301 Riverplace Blvd., Suite 1500</b> City <b>Jacksonville</b> FL Zip Code <b>32207</b>	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  DATE <b>8/12/04</b> <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
<b>Amended AR is \$61.25</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>D GARDNER, MICHAEL J 8110 SABAL OAK LANE JACKSONVILLE, FL 32256</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>D/P/S/T Gardner, Michael J. 25 Harmony School Road Flemington, New Jersey 08822</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>200040690822</b> <b>08/31/04--01048--004 **\$61.25</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE:  <b>Michael J. Gardner, President</b>		Date <b>8-12-04</b> <b>908-672-3897</b>	