2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000063048

FILED Feb 09, 2004 Secretary of State

Entity Name: J MAF	RTIN CONSULTING INC					
Current Principal Place of Business:			New Principal Place of Business:			
1808 SW 49TH TERRACE CAPE CORAL, FL 33914			C/O FURLONG TITLE 8771 COLLEGE PARKWAY #102 FORT MYERS, FL 33919			
Current Mailing Address:			New Mailing Address:			
1808 SW 49TH TERRACE CAPE CORAL, FL 33914			C/O DELMAR FINANCIAL CORPORATION 3949 SPARKS DRIVE SE #100 GRAND RAPIDS, MI 49546			
FEI Number:	FEI Number Applied For (X)	FEI Nur	nber Not Appli	icable ()	Certificate of Status	Desired ()
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:			
VREDEVOOGD, JON M 1808 SW 49TH TERRACE CAPE CORAL, FL 33914			VREDEVOOGD, JON M C/O FURLONG TITLE 8771 COLLEGE PARKWAY #102 FORT MYERS, FL 33919			
The above named ent in the State of Florida.	ity submits this statement for the p	urpose o	f changing it	ts registered	office or registered a	agent, or both,
SIGNATURE:			02/09/2004			
Electronic Signature of Registered Agent			Date			
Election Campaign Finan	cing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	() Delete		Title: Name: Address: City-St-Zip:	VREDEVOOG 3949 SPARKS) Change (X) Addition D, JON M PRES DRIVE SE #100 DS, MI 49546	
Title: Name: Address: City-St-Zip:	() Delete		Title: Name: Address: City-St-Zip:	FURLONG, JO	GE PARKWAY #102	
Title: Name: Address: City-St-Zip:	() Delete		Title: Name: Address: City-St-Zip:	TODD, CARR 3949 SPARKS) Change (X) Addition IE L TS S DRIVE SE #100 DS, MI 49546	

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: CARRIE TODD 02/09/2004 S