

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000072630

FILED
Jan 19, 2004
Secretary of State

Entity Name: ALL AMERICAN RECOVERY, INC.

Current Principal Place of Business:

1344 W. COLONIAL DRIVE
ORLANDO, FL 32804 US

New Principal Place of Business:

Current Mailing Address:

1344 W. COLONIAL DRIVE
ORLANDO, FL 32804 US

New Mailing Address:

FEI Number: 11-3694846

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GLICKEN, DAVID S
112-114 E. CONCORD ST
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

GLICKEN, DOUGLAS H
1344 W. COLONIAL DRIVE
ORLANDO, FL 32804 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: DOUGLAS H. GLICKEN

01/19/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WILLOUGHBY, BRIDGET D
Address: 852 PARK LAKE COURT
City-St-Zip: ORLANDO, FL 32803 US

Title: VP () Delete
Name: WILLOUGHBY, MAMIE
Address: 502 RIVERWOODS CIRCLE
City-St-Zip: ORLANDO, FL 32825 US

Title: S/T (X) Delete
Name: GLICKEN, DOUGLAS H
Address: 852 PARK LAKE COURT
City-St-Zip: ORLANDO, FL 32803

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S/T (X) Change () Addition
Name: GLICKEN, DOUGLAS H
Address: 852 PARK LAKE COURT
City-St-Zip: ORLANDO, FL 32803 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BRIDGET D. WILLOUGHBY

PRES

01/19/2004

Electronic Signature of Signing Officer or Director

Date