2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000081095

Entity Name: CLINE GROUP ADVERTISING, INC.

FILED Apr 27, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4747 N. OCEAN DRIVE 4747 N. OCEAN DRIVE

207 237

FORT LAUDERDALE, FL 33308 FORT LAUDERDALE, FL 33308

Current Mailing Address: New Mailing Address:

4747 N. OCEAN DRIVE 4747 N. OCEAN DRIVE

237

FORT LAUDERDALE, FL 33308 FORT LAUDERDALE, FL 33308

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CLINE, WILLIAM H III
4561 BOUGAINVILLA DRIVE
4747 N. OCEAN DRIVE

FORT LAUDERDALE, FL 33308 237 FORT LAUDERDALE, FL 33308

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: WILLIAM CLINE 04/27/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition CLINE, WILLIAM H III CLINE, WILLIAM H III Name: Name: 4747 N. OCEAN DRIVE, #237 4561 BOUGAINVILLA DR. Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33308 City-St-Zip: FORT LAUDERDALE, FL 33308

Title: V () Delete Title: V (X) Change () Addition

Name: CLINE, PATRICIA A Name: CLINE, PATRICIA A

Address: 4561 BOUGAINVILLA DR. Address: 4747 N. OCEAN DRIVE, #237 City-St-Zip: FORT LAUDERDALE, FL 33308 City-St-Zip: FORT LAUDERDALE, FL 33308

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: WILLIAM CLINE PRES 04/27/2004