2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000082618

Address:

City-St-Zip:

4252 LEAPING DEER LANE

JACKSONVILLE, FL 32259 US

ty Name: SOURCE THREE CONSULTING INC

FILED Apr 12, 2004 Secretary of State

Entity Nai	me: SOURCE THE	REE CONSULTING, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	PING DEER LANE VILLE, FL 32259	US			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	PING DEER LANE VILLE, FL 32259	US			
FEI Number	: 20-0124638 FE	I Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
JACKSON The above	PING DEER LANE VILLE, FL 32259	US nits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATU					
	Electronic Si	gnature of Registered Ag	ent	Date	
Election Car	mpaign Financing Tru	st Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P,T () Dele BLOCH, AGNES L 4252 LEAPING DEEI JACKSONVILLE, FL	R LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP,S () Dele BLOCH, MITCHELL I 4252 LEAPING DEEI JACKSONVILLE, FL	E R LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	D (X) Dele	te	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: AGNES L. BLOCH PRES 04/12/2004