

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000087976

Entity Name: MADISON PGS, INC.

FILED  
Apr 19, 2005  
Secretary of State

## Current Principal Place of Business:

50 EAST SAMPLE ROAD  
SUITE 400  
POMPANO BEACH, FL 33064 US

## New Principal Place of Business:

## Current Mailing Address:

50 EAST SAMPLE ROAD  
SUITE 400  
POMPANO BEACH, FL 33064 US

## New Mailing Address:

FEI Number: 16-1680495

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHEER, DANA M  
50 EAST SAMPLE ROAD  
SUITE 400  
POMPANO BEACH, FL 33064 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P, D ( ) Delete  
Name: SCHEER, PIA G  
Address: 50 EAST SAMPLE ROAD, SUITE 400  
City-St-Zip: POMPANO BEACH, FL 33064 US

Title: VP ( ) Delete  
Name: SCHEER, DANA M  
Address: 50 EAST SAMPLE ROAD, SUITE 400  
City-St-Zip: POMPANO BEACH, FL 33064 US

Title: T, D ( ) Delete  
Name: SCHEER, DANA M  
Address: 50 EAST SAMPLE ROAD, SUITE 400  
City-St-Zip: POMPANO BEACH, FL 33064 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: DANA M. SCHEER

VP

04/19/2005

Electronic Signature of Signing Officer or Director

Date