2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2004
Secretary of State

DOCUMENT# P03000097214

Entity Name: OPTIMA PERFORMANCE, INC.

Current Principal Place of Business:

17943 SE 87TH BOURNE AVENUE
THE VILLAGES, FL 32162

New Principal Place of Business:

PO BOX 1450
WEST CHESTER, PA 19380

Current Mailing Address:

17943 SE 87TH BOURNE AVENUE
THE VILLAGES, FL 32162

New Mailing Address:

PO BOX 1450
WEST CHESTER, PA 19380

FEI Number: 20-0207262 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CROWLEY, JAMES D
17943 SE 87TH BOURNE AVE
THE VILLAGES, FL 32162

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 ( ) Delete
Name: CROWLEY, SUZANNE M
Address: 604 FRANKLIN WAY
City-St-Zip: WEST CHESTER, PA 19380

Title: V ( ) Delete
Name: LAWSON, CHRISTINE B
Address: 604 FRANKLIN WAY
City-St-Zip: WEST CHESTER, PA 19380

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change ( ) Addition
Name: LAWSON, CHRISTINE B
Address: 17 MORGAN SPRING DR.
City-St-Zip: MORGANTOWN, PA 19534

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: SUZANNE M CROWLEY P 04/14/2004
Electronic Signature of Signing Officer or Director — Date