

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000100293

FILED
Mar 08, 2004
Secretary of State

Entity Name: LIABILITY MANAGEMENT CORPORATION

Current Principal Place of Business:

1560 SAWGRASS CORPORATE PARKWAY
4TH FLOOR
SUNRISE, FL 33323

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 451178
SUNRISE, FL 333451178

New Mailing Address:

1560 SAWGRASS CORPORATE PARKWAY
4TH FLOOR SUITE 465
SUNRISE, FL 33323

FEI Number: 20-0561465

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TRUSTMARK PLAN ADMINISTRATION, INC.
9810 NORTHWEST 10TH COURT
PLANTATION, FL 33322 US

Name and Address of New Registered Agent:

SCHWEITZER, ANDY I
9810 NORTHWEST 10TH COURT
PLANTATION, FL 33322 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: ANDY SCHWEITZER

03/08/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SCHWEITZER, AMNON I
Address: P.O. BOX 451178
City-St-Zip: SUNRISE, FL 333451178

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D,P () Change (X) Addition
Name: HAYMON, STEVEN E PRES.
Address: P.O. BOX 451178
City-St-Zip: SUNRISE, FL 333451178

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: STEVEN HAYMON

D

03/08/2004

Electronic Signature of Signing Officer or Director

Date