2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000113291

- 44 N

17951 HOLLY BROOK DR.

TAMPA, FL 33647

Address:

City-St-Zip:

FILED Apr 30, 2004 Secretary of State

Entity Name: OUTPOST ASSOCIATES, INC. **Current Principal Place of Business: New Principal Place of Business:** 17951 HOLLY BROOK DR. TAMPA, FL 33647 **Current Mailing Address: New Mailing Address:** 17951 HOLLY BROOK DR. TAMPA, FL 33647 FEI Number: 20-0296319 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GEHRIG, GREGORY P 17951 HOLLY BROOK DR. TAMPA, FL 33647 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition GEHRIG, MICHELLE E Name: Name: 17951 HOLLY BROOK DR. Address: Address: City-St-Zip: TAMPA, FL 33647 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition Name: GEHRIG, GREGORY P 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: GREGORY GEHRIG VP 04/30/2004