

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000117910

FILED
Apr 03, 2004
Secretary of State

Entity Name: EUROFUND MANAGEMENT, INC.

Current Principal Place of Business:

1324 SEVEN SPRINGS BLVD.
NO. 373
NEW PORT RICHEY, FL 34655

New Principal Place of Business:

Current Mailing Address:

1324 SEVEN SPRINGS BLVD.
NO. 373
NEW PORT RICHEY, FL 34655

New Mailing Address:

FEI Number: 11-3707296

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REYMANN, T. GREGORY II
979 BEACHLAND BLVD.
VERO BEACH, FL 32963

Name and Address of New Registered Agent:

REYMANN, T. GREGORY II
2645 47TH AVENUE
VERO BEACH, FL 32966

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: T. GREGORY REYMANN, II

04/03/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: NELSON, GARY S
Address: 1324 SEVEN SPRINGS BLVD. NO. 373
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: D () Delete
Name: NELSON, JUDITH
Address: 1324 SEVEN SPRINGS BLVD. NO. 373
City-St-Zip: NEW PORT RICHEY, FL 34655

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/P (X) Change () Addition
Name: NELSON, GARY S
Address: 1324 SEVEN SPRINGS BLVD. NO. 373
City-St-Zip: NEW PORT RICHEY, FL 34655

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

Title: C () Change (X) Addition
Name: REYMANN, T. GREGORY II
Address: 2645 47TH AVENUE
City-St-Zip: VERO BEACH, FL 32966

Title: V P () Change (X) Addition
Name: STODDARD, JAMES JR.
Address: 5072 98TH WAY NORTH
City-St-Zip: ST. PETERSBURG, FL 33708

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: JUDITH E. NELSON

D

04/03/2004

Electronic Signature of Signing Officer or Director

Date