

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000130567

FILED  
Apr 24, 2004  
Secretary of State

Entity Name: COPERNICUS PARTNERS, INC.

## Current Principal Place of Business:

5399 E HWY C-30-A BOX 182  
SANTA ROSA BEACH, FL 32459

## New Principal Place of Business:

## Current Mailing Address:

5399 E HWY C-30-A BOX 182  
SANTA ROSA BEACH, FL 32459

## New Mailing Address:

FEI Number: 20-0386285

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

## Name and Address of New Registered Agent:

SHEETS, KRISTA S  
5399 E HWY C-30-A BOX 182  
SANTA ROSA BEACH, FL 32459 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: KRISTA S. SHEETS

04/24/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SAENZ, STEPHEN A  
Address: 45 SUGAR SAND LANE, SUITE A  
City-St-Zip: SANTA ROSA BEACH, FL 32459

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: SAENZ, STEPHEN A  
Address: 5399 E HWY C-30-A BOX 182  
City-St-Zip: SANTA ROSA BEACH, FL 32459 US

Title: O ( ) Change (X) Addition  
Name: SHEETS, KRISTA S  
Address: 199 14TH STREET, NE #2605  
City-St-Zip: ATLANTA, GA 30309 US

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: KRISTA S. SHEETS

O

04/24/2004

Electronic Signature of Signing Officer or Director

Date