

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18412

Entity Name: SYLVAN AGENCY, INC.

FILED
Jan 08, 2004
Secretary of State

Current Principal Place of Business:

8888 KEYSTONE CROSSING
SUITE 720
INDIANAPOLIS, IN 46240 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 179
NIAGARA SQUARE STATION
BUFFALO, NY 14201 US

New Mailing Address:

FEI Number: 95-4135179

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT COROPORATION SYS
1200 S PINE ISLAND RD
PLANTATION, FL 33324 US

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: PD () Delete
Name: SIMPSON, HUGH A
Address: 6640 LUSK BLVD. #A-202
City-St-Zip: SAN DIEGO, CA 92121

Title: VP () Delete
Name: ROLLENDELLI, JOHN P
Address: 6640 LUSK BLVD. #A-202
City-St-Zip: SAN DIEGO, CA 92121

Title: AS () Delete
Name: CASEY, SHELLEY
Address: 6640 LUSK BLVD. A-202
City-St-Zip: SAN DIEGO, CA 92121

Title: AS () Delete
Name: LEKARCZYK, DAVID A
Address: 9111 BROADWAY, SUITE F
City-St-Zip: MERRILLVILLE, IN 46411

Title: AS () Delete
Name: VALENTINE, JAMES B
Address: 9111 BROADWAY, #F
City-St-Zip: MERRILLVILLE, IN 46411

Title: D () Delete
Name: HYMERS, GLENN S
Address: 6640 LUSK BLVD. #A-202
City-St-Zip: SAN DIEGO, CA 92121

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: () Change () Addition
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: SHELLEY CASEY

AS

01/08/2004

Electronic Signature of Signing Officer or Director

Date