

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P30969

Entity Name: ARLON, INC.

FILED  
Apr 29, 2004  
Secretary of State

## Current Principal Place of Business:

300 PRIMERA BLVD  
STE 432  
LAKE MARY, FL 32746

## New Principal Place of Business:

## Current Mailing Address:

300 PRIMERA BLVD  
STE 432  
LAKE MARY, FL 32746

## New Mailing Address:

FEI Number: 33-0311000

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE, FL 32301 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: D ( ) Delete  
Name: FICHTHORN, LUKE E., III  
Address: 514 HOLLOW TREE RIDGE RD  
City-St-Zip: LONGWOOD, FL 32779

Title: DVP ( ) Delete  
Name: PRUIM, ELMER  
Address: 16235 DAVINCI DR  
City-St-Zip: CHINO HILL, CA

Title: DSAT ( ) Delete  
Name: SMITH, LARRY D  
Address: 191 VASITY CIR  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: AT ( ) Delete  
Name: WANAMAKER, WAYNE M  
Address: 3801 GOLDENGLOW DRIVE  
City-St-Zip: ORLANDO, FL 32828

Title: VDT ( ) Delete  
Name: MAINGOT, LARRY C  
Address: 1060 VISTA ROAD  
City-St-Zip: LONGWOOD, FL 32750

Title: DVP ( ) Delete  
Name: CARINI, ROBERT  
Address: 7 WITHERS WAY  
City-St-Zip: HOCKESSIN, DE 19707

## 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: WAYNE M. WANAMAKER

AT

04/29/2004

Electronic Signature of Signing Officer or Director

Date