2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000014612

Entity Name: S.P.V.N., INC.

FILED Mar 09, 2004 Secretary of State

5000 STACK BLVD. MELBOURNE, FL 32901

Current Mailing Address: New Mailing Address:

P.O. BOX 216 P.O. BOX 411957

CAPE CANAVERAL, FL 32920 MELBOURNE, FL 32941

FEI Number: 59-3156227 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:

BOYLE, JOHN
2655 TURTLEMOUND RD
MELBOURNE, FL 32934 US
REINMAN, JAMES L ESQUIRE
1825 RIVERVIEW DRIVE
MELBOURNE, FL 32901 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: JAMES L. REINMAN, ESQUIRE 03/09/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 BOYLE, JOHN
 Name:
 TRUETT, JACK

 Address:
 2655 TURTLEMOUND RD
 Address:
 265 SANDY RUN

 City-St-Zip:
 MELBOURNE, FL 32934
 City-St-Zip:
 MELBOURNE, FL 32940

Title: T () Delete Title: S (X) Change () Addition Name: PHELPS, H Name: TRUETT, LOUISE

 Name:
 PRELPS, FI
 Name:
 TROETT, LOUISE

 Address:
 651 DUNDEE CR
 Address:
 265 SANDY RUN

 City-St-Zip:
 MELBOURNE, FL 32904
 City-St-Zip:
 MELBOURNE, FL 32940

Title: S (X) Delete Title: () Change () Addition

Title: D (X) Delete Title: () Change () Addition

 Name:
 DAVIS, B E
 Name:

 Address:
 7650 PINECREST AVE
 Address:

 City-St-Zip:
 MELBOURNE, FL 32904
 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: JACK TRUETT P 03/09/2004