2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2004
Secretary of State

DOCUMENT# P93000062907

Entity Name: ANTON INVESTMENTS, INC.

Current Principal Place of Business:

578 US RT 1
SCARBOROUGH, ME 04074

New Principal Place of Business:

1292 HAMMOND STREET
BANGOR, ME 04401

Current Mailing Address:

P.O. BOX 1328
BANGOR, ME 04402 US

New Mailing Address:

FEI Number: 01-0491214 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARRIS, MICHAEL D
1645 PALM BEACH LAKES BLVD
SUITE 550
NORTH PALM BEACH, FL 33408 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: P ( ) Delete
Name: ANTON, MICHAEL
Address: 9 HAIGIS PARKWAY
City-St-Zip: SCARBOROUGH, ME 04074

Title: V ( ) Delete
Name: NYER, SAMUEL
Address: 1292 HAMMOND STREET
City-St-Zip: BANGOR, ME 04401

Title: T ( ) Delete
Name: WRIGHT, KAREN
Address: 1292 HAMMOND STREET
City-St-Zip: BANGOR, ME 04401

Title: D (X) Delete
Name: CLIFFORD, WILLIAM JR
Address: 1292 HAMMOND STREET
City-St-Zip: BANGOR, ME 64401

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:

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: KAREN L. WRIGHT T 04/14/2004
Electronic Signature of Signing Officer or Director Date