

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000087683

FILED
Aug 02, 2004
Secretary of State

Entity Name: THE UMBRELLA GROUP OF FLORIDA, INC.

Current Principal Place of Business:

2891 CENTER POINT DR.
SUITE 207
FT. MYERS, FL 33916 US

New Principal Place of Business:

Current Mailing Address:

2891 CENTER POINT DR.
SUITE 207
FT. MYERS, FL 33916 US

New Mailing Address:

FEI Number: 65-0455937

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERTSON, SCOTT D
2891 CENTRE PT DR STE 207
FORT MYERS, FL 33916 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: CFO () Delete
Name: RYAN, MICHAEL S
Address: 20 HORSENECK LANE
City-St-Zip: GREENWICH, CT 06830

Title: S () Delete
Name: TECKLIN, STACEY
Address: 20 HORSENECK LANE
City-St-Zip: GREENWICH, CT 06830

Title: D () Delete
Name: DITCHFIELD, ALLAN
Address: 20 HORSENECK LANE
City-St-Zip: GREENWICH, CT 06830

Title: D () Delete
Name: SAWYER, ANDREW
Address: 20 HORSENECK LANE
City-St-Zip: GREENWICH, CT 06830

Title: CEO () Delete
Name: MILLIGAN, ROBERT
Address: 20 HORSENECK LANE
City-St-Zip: GREENWICH, CT 06830

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CFO (X) Change () Addition
Name: FARMER, ELIZABETH
Address: 2891 CENTER POINT DR SUITE 207
City-St-Zip: FT. MYERS, FL 33916

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: ELIZABETH FARMER

CFO

08/02/2004

Electronic Signature of Signing Officer or Director

Date