

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000011556

FILED
Jan 18, 2004
Secretary of State

Entity Name: ALBRECHT CONSULTING COMPANY, INC.

Current Principal Place of Business:

830 S GULFVIEW BLVD #705
CLEARWATER, FL 34630 US

New Principal Place of Business:

830 S GULFVIEW BLVD
NO. 705
CLEARWATER, FL 33767 US

Current Mailing Address:

830 S GULFVIEW BLVD #705
CLEARWATER, FL 34630 US

New Mailing Address:

830 S GULFVIEW BLVD
NO. 705
CLEARWATER, FL 33767 US

FEI Number: 59-3224009

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALBRECHT, CLIFFORD C
830 S GULFVIEW BLVD #705
CLEARWATER, FL 33630

Name and Address of New Registered Agent:

ALBRECHT, CLIFFORD C
830 S GULFVIEW BLVD
NO. 705
CLEARWATER, FL 33767

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: CLIFFORD C. ALBRECHT

01/18/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ALBRECHT, CLIFFORD C
Address: 830 S GULFVIEW BLVD #705
City-St-Zip: CLEARWATER, FL 34630

Title: ST () Delete
Name: ALBRECHT, JANET E
Address: 830 S GULFVIEW BLVD #705
City-St-Zip: CLEARWATER, FL

Title: V () Delete
Name: BALL, GAIL E
Address: 20 BJORKLUND AVE
City-St-Zip: WORCESTER, MA 01605

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:

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: CLIFFORD C. ALBRECHT

MR

01/18/2004

Electronic Signature of Signing Officer or Director

Date