

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000063968

FILED  
Apr 28, 2004  
Secretary of State

Entity Name: INNOVATIVE FINANCIAL SERVICES, INC.

## Current Principal Place of Business:

5401 S. KIRKMAN ROAD  
SUITE 450  
ORLANDO, FL 32819 US

## New Principal Place of Business:

## Current Mailing Address:

5401 S. KIRKMAN ROAD  
SUITE 450  
ORLANDO, FL 32819 US

## New Mailing Address:

P.O. BOX 690129  
ORLANDO, FL 32869 US

FEI Number: 59-3263950

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MAHONEY-MIEKLE, KATHLEEN  
108 HARWOOD CIRCLE  
KISSIMMEE, FL 34744 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: MAHONEY-MIEKLE, KATHLEEN  
Address: 108 HARWOOD CIR  
City-St-Zip: KISSIMMEE, FL 34744

Title: VP ( ) Delete  
Name: MEIKLE, STEPHEN C  
Address: 108 HARWOOD CIRCLE  
City-St-Zip: KISSIMMEE, FL 34744

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: KATHLEEN MAHONEY-MIEKLE

P

04/28/2004

Electronic Signature of Signing Officer or Director

Date