

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000063558

FILED
Apr 13, 2004
Secretary of State

Entity Name: INDEPENDENCE MANAGEMENT, INC.

Current Principal Place of Business:

2400 EAST LAS OLAS BLVD.
PMB 312
FT. LAUDERDALE, FL 33301

New Principal Place of Business:

5380 GULF OF MEXICO DR.
#223
LONGBOAT KEY, FL 34228

Current Mailing Address:

C/O GREGG PEAD
2007 81ST STREET NORTH
BRADENTON, FL 34209

New Mailing Address:

FEI Number: 65-0642216

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GLASS, SUSAN B
2400 EAST LAS OLAS BLVD.
SUITE 312
FT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

GLASS, SUSAN B
5380 GULF OF MEXICO DR.
#223
LONGBOAT KEY, FL 34228 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:

04/13/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GLASS, SUSAN B
Address: 2400 E. LAS OLAS BLVD., PMB 312
City-St-Zip: FT LAUDERDALE, FL 33301

Title: STD () Delete
Name: GLASS, DAVID M
Address: 2400 E. LAS OLAS BLVD., PMB 312
City-St-Zip: FT LAUDERDALE, FL 33301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GLASS, SUSAN B
Address: 5380 GULF OF MEXICO DR. #223
City-St-Zip: LONGBOAT KEY, FL 34228

Title: STD (X) Change () Addition
Name: GLASS, DAVID M
Address: 5380 GULF OF MEXICO DR. #223
City-St-Zip: LONGBOAT KEY, FL 34228

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: SUSAN B. GLASS

PRES

04/13/2004

Electronic Signature of Signing Officer or Director

Date