

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 24, 2004 08:00 AM
Secretary of State

DOCUMENT # P95000068313 1. Entity Name CAPTECH GROUP, INC.			
Principal Place of Business 2834 INDUSTRIAL PLAZA DRIVE SUITE B TALLAHASSEE, FL 32301		Mailing Address 2834 INDUSTRIAL PLAZA DRIVE SUITE B TALLAHASSEE, FL 32301	
DO NOT WRITE IN THIS SPACE			
		01202004 No Chg-P CR2E034 (10/03)	
		4. FEI Number 59-3348415	
		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CHAVEZ, MICHAEL 2834 INDUSTRIAL PLAZA DRIVE SUITE B TALLAHASSEE, FL 32301		DO NOT WRITE IN THIS SPACE	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PUTNAL, STEVEN S 5430 RIVOLI DRIVE MACON, GA 31201		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHAVEZ, MICHAEL 1376 OLD VILLAGE COURT TALLAHASSEE, FL 32312		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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DO NOT WRITE IN THIS SPACE			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u>Stephen S. Putnal</u> (Stephen S. Putnal)		1-22-04 478-746-2041	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	