## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000003498

JESSEN, LAWRENCE M

7113 42ND COURT EAST

SARASOTA, FL 34243

Name:

Address:

City-St-Zip:

Entity Name: CUB HOLDINGS, INC.

FILED Apr 08, 2004 Secretary of State

•		,			
Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
STE 105	KLAND DRIVE A, FL 34243	US	5581 BROADCAST COI STE 100 SARASOTA, FL 34240	JRT US	
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
STE 105	KLAND DRIVE A, FL 34243	US	5581 BROADCAST COI STE 100 SARASOTA, FL 34240	JRT US	
FEI Number:	: 65-0636335	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
1505 N FL	BENJAMIN ORIDA AVE HODGES L 33601				
	e named entity s e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:				
	Electron	ic Signature of Registered Age	ent	Date	
Election Car	mpaign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	DP () PIANO, ANTHOI 6654 WINDJAN BRADENTON, F	MER	Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address: City-St-Zip:	DS () KRANITZ, RICH 1238 12TH AVE GRAFTON, WI	NUE	Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D (X) DAVIS, RICHAR 1503 WEST MA MEQUON, WI	RKET STREET	Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition	
Title:	DVT ()	Delete	Title: (	) Change ( ) Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: LAWRENCE M. JESSEN DVT 04/08/2004