

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000015575

FILED  
Jan 08, 2004  
Secretary of State

Entity Name: KLAYMAN/ALEXANDER GROUP, INC.

## Current Principal Place of Business:

15900 GLENISLE WAY  
FT MYERS, FL 33912

## New Principal Place of Business:

3903 VALENTIA WAY  
NAPLES, FL 34119

## Current Mailing Address:

15900 GLENISLE WAY  
FT MYERS, FL 33912

## New Mailing Address:

3903 VALENTIA WAY  
NAPLES, FL 34119

FEI Number: 65-0651842

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KLAYMAN, BARRY  
15900 GLENISLE WAY  
FT MYERS, FL 33912

## Name and Address of New Registered Agent:

KLAYMAN, BARRY  
3903 VALENTIA WAY  
NAPLES, FL 33912

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:

01/08/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSC ( ) Delete  
Name: KLAYMAN-BARTON, BARRY  
Address: 15900 GLEN ISLE WAY  
City-St-Zip: FT. MYERS, FL 33912

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change ( ) Addition  
Name: KLAYMAN, BARRY H CEO  
Address: 3903 VALENTIA WAY  
City-St-Zip: NAPLES, FL 33912

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: BARRY KLAYMAN

CEO

01/08/2004

Electronic Signature of Signing Officer or Director

Date