

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000055295

FILED  
Jan 15, 2004  
Secretary of State

**Entity Name:** INTERLACHEN PORTFOLIO MANAGEMENT COMPANY

**Current Principal Place of Business:**

200 EAST NEW ENGLAND AVE  
200  
WINTER PARK, FL 32789 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1916  
WINTER PARK, FL 327901916 US

**New Mailing Address:**

**FEI Number:** 59-3401153

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BODE, C. BAXTER  
200 EAST NEW ENGLAND AVE  
200  
WINTER PARK, FL 32789

**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: D ( ) Delete  
Name: BODE, C. B  
Address: 200 E NEW ENGLAND AVE. #200  
City-St-Zip: WINTER PARK, FL 32790

Title: AST ( ) Delete  
Name: BODE, SUSAN B  
Address: 200E NEW ENGLAND AVE.#200  
City-St-Zip: WINTER PARK, FL 32790

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: MGRM (X) Change ( ) Addition  
Name: BODE, C. B  
Address: 200 E NEW ENGLAND AVE. #200  
City-St-Zip: WINTER PARK, FL 32790

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: C. BAXTER BODE

MGRM

01/15/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date