

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000057180

Entity Name: MAIER & COMPANY, INC.

FILED
Apr 28, 2004
Secretary of State

Current Principal Place of Business:

131 INDIGO COVE PLACE
POST OFFICE BOX 510278
MELBOURNE BEACH, FL 32951

Current Mailing Address:

131 INDIGO COVE PLACE
POST OFFICE BOX 510278
MELBOURNE BEACH, FL 32951

New Principal Place of Business:

500 5TH AVE
POST OFFICE BOX 510278
MELBOURNE BEACH, FL 32951

New Mailing Address:

500 5TH AVE
POST OFFICE BOX 510278
MELBOURNE BEACH, FL 32951

FEI Number: 59-3399406

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KINBERG, EDWARD J
2101 WAVERLY PLACE #200E
MELBOURNE, FL 32901 US

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: MAIER, ROBERT E
Address: 131 INDIGO COVE PLACE
City-St-Zip: MELBOURNE BEACH, FL 32951

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MAIER, ROBERT E
Address: 500 5TH AVE
City-St-Zip: MELBOURNE BEACH, FL 32951

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: ROBERT E. MAIER

PRES

04/28/2004

Electronic Signature of Signing Officer or Director

Date