2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 22, 2005
Secretary of State

DOCUMENT# P97000003273

Entity Name: MEDALIST MANAGEMENT COMPANY

Current Principal Place of Business:

9908 SE COTTEGE LN
HOBE SOUND, FL 33455

New Principal Place of Business:

Current Mailing Address:

9908 SE COTTEGE LN
HOBE SOUND, FL 33455

New Mailing Address:

FEI Number: 65-0843803 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHNEIDER, JACK
501 NORTH A1A HWY
JUPITER, FL 33477 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: DS ( ) Delete
Name: FAIR, IAN
Address: 501 NORTH A1A
City-St-Zip: JUPITER, FL 33477

Title: DEVP ( ) Delete
Name: SCHNEIDER, JACK
Address: 501 NORTH A1A HWY
City-St-Zip: JUPITER, FL 33477

Title: DP ( ) Delete
Name: NORMAN, GREG
Address: 501 NORTH A1A HWY
City-St-Zip: JUPITER, FL 33477

Title: T ( ) Delete
Name: DAVIS, WYNN
Address: 501 NORTH A1A HWY
City-St-Zip: JUPITER, FL 33477

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: JACK SCHNEIDER DEVP 02/22/2005

Electronic Signature of Signing Officer or Director Date