2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 23, 2004
Secretary of State

DOCUMENT# P97000046288

Entity Name: GRAHAM CONSULTING GROUP, INC.

Current Principal Place of Business:

1528 N. DIXIE HIGHWAY
SUITE 1
LAKE WORTH, FL 33460

New Principal Place of Business:

631 US HIGHWAY ONE
SUITE 401
NORTH PALM BEACH, FL 33408

Current Mailing Address:

1528 N. DIXIE HIGHWAY
SUITE 1
LAKE WORTH, FL 33460

New Mailing Address:

631 US HIGHWAY ONE
SUITE 401
NORTH PALM BEACH, FL 33408

FEI Number: 65-0762409 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GRAHAM, CAROL S
1528 N. DIXIE HIGHWAY
SUITE 1
LAKE WORTH, FL 33460 US

Name and Address of New Registered Agent:

GRAHAM, WILLIAM S
631 US HIGHWAY ONE
SUITE 401
NORTH PALM BEACH, FL 33408 US

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: WILLIAM S. GRAHAM 07/23/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPST ( ) Delete
Name: GRAHAM, CAROL S
Address: 1528 N. DIXIE HIGHWAY, SUITE 1
City-St-Zip: LAKE WORTH, FL 33460

Title: DC (X) Delete
Name: GRAHAM, WILLIAM S
Address: 1520 NO DIXIE HWY #1
City-St-Zip: LAKE WORTH, FL 33460

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change ( ) Addition
Name: GRAHAM, WILLIAM S
Address: 631 US HIGHWAY ONE SUITE 401
City-St-Zip: NORTH PALM BEACH, FL 33408

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: WILLIAM S. GRAHAM P 07/23/2004
Electronic Signature of Signing Officer or Director Date