

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000078978

FILED  
Feb 10, 2004  
Secretary of State

Entity Name: PL&E INVESTMENT SERVICES, INC.

## Current Principal Place of Business:

6622 SOUTHPOINT DR S  
STE 495, BARNETT PLAZA  
JACKSONVILLE, FL 322166188

## Current Mailing Address:

6622 SOUTHPOINT DR S  
STE 495, BARNETT PLAZA  
JACKSONVILLE, FL 322166188 US

## New Principal Place of Business:

6622 SOUTHPOINT DR S  
SUITE 495  
JACKSONVILLE, FL 322166188 US

## New Mailing Address:

6622 SOUTHPOINT DR S  
SUITE 495  
JACKSONVILLE, FL 322166188 US

FEI Number: 59-3467637

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PRESSER, EDWIN  
8853 SAN JOSE BLVD.  
JACKSONVILLE, FL 322174244 US

## Name and Address of New Registered Agent:

ELEFANT, FRED  
1650 PRUDENTIAL DRIVE  
SUITE 105  
JACKSONVILLE, FL 32207 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: FRED ELEFANT

02/10/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: DANIEL M EDELMAN,  
Address: 6622 SOUTHPOINT DR S #495  
City-St-Zip: JACKSONVILLE, FL 32216

Title: VP ( ) Delete  
Name: WILLIAM R LAHNEN, JR  
Address: 6622 SOUTHPOINT DR S #495  
City-St-Zip: JACKSONVILLE, FL 32216

Title: VP ( ) Delete  
Name: RANDALL L HERNDON,  
Address: 6622 SOUTHPOINT DR S #495  
City-St-Zip: JACKSONVILLE, FL 32216

Title: ST ( ) Delete  
Name: NEIL N PRESSER,  
Address: 6622 SOUTHPOINT DR S #495  
City-St-Zip: JACKSONVILLE, FL 32216

Title: AST ( ) Delete  
Name: JOHN W RANES, JR  
Address: 6622 SOUTHPOINT DR S #495  
City-St-Zip: JACKSONVILLE, FL 32216

Title: D ( ) Delete  
Name: BROWN, EVY E  
Address: 6622 SOUTHPOINT DR S #495  
City-St-Zip: JACKSONVILLE, FL 32216

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: EDELMAN, DANIEL M  
Address: 6622 SOUTHPOINT DR S #495  
City-St-Zip: JACKSONVILLE, FL 32216 US

Title: VP (X) Change ( ) Addition  
Name: LAHNEN, WILLIAM R JR  
Address: 6622 SOUTHPOINT DR S #495  
City-St-Zip: JACKSONVILLE, FL 32216 US

Title: VP (X) Change ( ) Addition  
Name: HERNDON, RANDALL L  
Address: 6622 SOUTHPOINT DR S #495  
City-St-Zip: JACKSONVILLE, FL 32216 US

Title: ST (X) Change ( ) Addition  
Name: PRESSER, NEIL N  
Address: 6622 SOUTHPOINT DR S #495  
City-St-Zip: JACKSONVILLE, FL 32216 US

Title: AST (X) Change ( ) Addition  
Name: RANES, JOHN W JR  
Address: 6622 SOUTHPOINT DR S #495  
City-St-Zip: JACKSONVILLE, FL 32216 US

Title: D (X) Change ( ) Addition  
Name: BROWN, EVY E  
Address: 6622 SOUTHPOINT DR S #495  
City-St-Zip: JACKSONVILLE, FL 32216 US

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: NEIL N PRESSER

ST

02/10/2004

Electronic Signature of Signing Officer or Director

Date

EDELMAN, MATTHEW E - D  
6622 SOUTHPOINT DR S  
STE 495  
JACKSONVILLE, FL 32216