2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P98000079610

1. Entity Name PAYNE MANAGEMENT, INC.

Principal Place of Business

50 S.E. 4TH AVE. Delray Beach, FL 33483

Mailing Address

50 S.E. 4TH AVE. DELRAY BEACH, FL 33483

FILED Aug 16, 2004 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

07022004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0873809

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent

PERRY, MARK A 50 S.E. 4TH AVE. DELRAY BEACH, FL 33483

SIGNATURE:

				IIN	I HIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE				required when reinstaking)	DATE
FILE NOWIN FEE IS \$150-00 9. Election Campaign Finan Due by September 8, 2004 Trust Fund Contribution.			cing []	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10.	OFFICERS AND DIRE	ECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ENGLE, SUZANNE P 1604 OLD STAGE RD ALEXANDRIA, VA 22308		du		000000170184 08/16/04-80005-002 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTSD PAYNE, GEORGE N JR. 7210 WOODLORE DRIVE W. BLOOMFIELD, MI 48323		···		-
TITLE NAME STREET ADDRESS CRY-ST-ZIP				DO	NOT WRITE
RITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			-		- :
TITLE NAME STREET ADDRESS CITY - ST - ZIP					·
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 1 (9.07(3)ft). Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legislateflect as if made under pair; that I am anofficer or director of the compression of the report of supplemental report is true and that my signature shall have the same legislated as if made under pair; that I am anofficer or director of the compression of the compressio					