## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000105157

Entity Name: INVESTMENT RECOVERY NETWORK, INC.

FILED Apr 26, 2004 Secretary of State

| •   |  | ,                     |   |   |   |  |
|---|--|-----------------------|---|---|---|--|
| Current P   | rincipal Place of Business:  |                       | New Prince  | New Principal Place of Business:                    |   |  |
| 501 DAKOTA AVE<br>TAMPA, FL 33606 US                |  |                       |   | 1511 N WESTSHORE BLVD STE 320<br>TAMPA, FL 33607 US |   |  |
| Current Mailing Address:                            |  |                       | New Maili   | New Mailing Address:                                |   |  |
| 501 DAKOTA AVE<br>TAMPA, FL 33606 US                |  |                       | 1511 N WESTSHORE BLVD STE 320<br>TAMPA, FL 33607 US |   |   |  |
| FEI Number  | : 59-3555049 FEI Number Ap   | plied For ( ) FEI I   | Number Not App                                      | licable ( ) C                                       | Certificate of Status Desired ( )         |  |
| Name and  | Address of Current Registe   | ered Agent:           | Name and  | Address of Nev                                      | w Registered Agent:                       |  |
| 2909 BAY<br>TAMPA, F<br>The above<br>in the State   | named entity submits this sta<br>e of Florida.                                       | tement for the purpos | e of changing i                                     | ts registered offic                                 | ce or registered agent, or both,          |  |
| SIGNATURE: Electronic Signature of Registered Agent |  |                       |   | Date  |   |  |
| Election Car  | mpaign Financing Trust Fund Con  | -                     |   |   | Date                                      |  |
|   | S AND DIRECTORS:   | ( )                   | ADDITION  | IS/CHANGES TO                                       | O OFFICERS AND DIRECTO                    |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:         | P ( ) Delete<br>MAGNAN, ROBERT<br>1383 MONTEREY CIR NE<br>SAINT PETERSBURG, FL 33704 |                       | Title:<br>Name:<br>Address:<br>City-St-Zip:         | MAGNAN, ROBER<br>265 CATALAN BLY                    | VD NE                                     |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:         | D ( ) Delete<br>MCGOWEN, LLOYD<br>501 SOUTH DAKOTA AVE<br>TAMPA, FL 33606            |                       | Title:<br>Name:<br>Address:<br>City-St-Zip:         | RAHALL, R J   | hange ()Addition<br>DRE BLVD STE 320<br>7 |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:         | D ( ) Delete<br>MORSBACH, CARL<br>501 SOUTH DAKOTA AVE<br>TAMPA, FL 33606            |                       | Title:<br>Name:<br>Address:<br>City-St-Zip:         | MORSBACH, CAR<br>1511 N WESTSHO                     | DRE BLVD STE 320                          |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:         | D ( ) Delete<br>SMITH, DALE<br>501 SOUTH DAKOTA AVE<br>TAMPA, FL 33606               |                       | Title:<br>Name:<br>Address:<br>City-St-Zip:         | SMITH, DALE   | hange ()Addition<br>DRE BLVD STE 320<br>7 |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:         | D ( ) Delete<br>MANNING, RICHARD S<br>501 SOUTH DAKOTA AVE<br>TAMPA, FL 33606        |                       | Title:<br>Name:<br>Address:<br>City-St-Zip:         | MANNING, RICHA                                      | DRE BLVD STE 320                          |  |
| Title:<br>Name:<br>Address:                         | ST () Delete<br>SOUZA, MOIRA<br>501 SOUTH DAKOTA AVE                                 |                       | Title:<br>Name:<br>Address:                         | S/T (X) C<br>SOUZA, MOIRA<br>501 SOUTH DAKO         | hange()Addition                           |  |

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.

City-St-Zip:

TAMPA, FL 33606

SIGNATURE: ROBERT MAGNAN D 04/26/2004

TAMPA, FL 33606

City-St-Zip:

RICHARD A. KESS 1511 N WESTSHORE BLVD STE 320 TAMPA, FL 33607

CHARLES SWINDELL 1511 N WESTSHORE BLVD STE 320 TAMPA, FL 33607