2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000017131

Entity Name: PIRAMIDE, INC.

FILED Mar 29, 2004 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

200 N. LAURA STREET 6 EAST BAY STREET

SUITE 1200 SUITE 500

JACKSONVILLE, FL 32202 JACKSONVILLE, FL 32202

Current Mailing Address: New Mailing Address:

200 N. LAURA STREET 6 EAST BAY STREET

SUITE 1200 SUITE 500

JACKSONVILLE, FL 32202 JACKSONVILLE, FL 32202

FEI Number: 59-3638430 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

EDWARDS, DAVID J EDCOLAW, INC.
200 N. LAURA STREET 6 EAST BAY STREET
SUITE 1200 SUITE 500

JACKSONVILLE, FL 32202 JACKSONVILLE, FL 32202

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: LAURA AUSTIN, SEC. OF EDCOLAW, INC. 03/29/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition Name: KORNFEIND, ALESSANDRO E Name: KORNFEIND, ALESSANDRO E Address: 200 N. LAURA STREET, SUITE 1200 Address: 6 EAST BAY STREET, SUITE 500

Address: 200 N. LAURA STREET, SUITE 1200 Address: 6 EAST BAY STREET, SUITE City-St-Zip: JACKSONVILLE, FL 32202 City-St-Zip: JACKSONVILLE, FL 32202

Title: S () Delete Title: S (X) Change () Addition

Name: EDWARDS, DAVID J Name: EDWARDS, DAVID J

Address: 200 N LAURA STREET STET 1200 Address: 6 EAST BAY STREET, SUITE 500 City-St-Zip: JACKSONVILLE, FL 32202 City-St-Zip: JACKSONVILLE, FL 32202

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: DAVID J. EDWARDS S 03/29/2004