2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2004
Secretary of State

DOCUMENT# P99000018894

Entity Name: DIRECT ASSIGNMENT BENEFIT PLANS, INC.

Current Principal Place of Business:

700 CENTRAL AVE SUITE 301
ST. PETERSBURG, FL 33701

New Principal Place of Business:

Current Mailing Address:

700 CENTRAL AVE SUITE 301
ST. PETERSBURG, FL 33701

New Mailing Address:

FEI Number: 59-3639278 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STONER, ROBERT
700 CENTRAL AVE
STE 301
SAINT PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	PST	( ) Delete
Name:	STONER, JOHN R	
Address:	800 MONTEREY BLVD	
City-St-Zip:	SAINT PETERSBURG, FL 33704	
Title:	D	( ) Delete
Name:	ANNUNZIATA, THERESA	
Address:	16215 MUIRFIELD DR	
City-St-Zip:	ODESSA, FL 33556	
Title:	D	( ) Delete
Name:	STONER, ROBERT F	
Address:	1348 TIMBERLANE RD	
City-St-Zip:	TALLAHASSEE, FL 32312	
Title:	D	( ) Delete
Name:	STONER, ROBERT W	
Address:	11005 CINDERLANE PLACE	
City-St-Zip:	TEMPLE TERRACE, FL 33617	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: JOHN R. STONER PST 01/13/2004

Electronic Signature of Signing Officer or Director — Date