

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000054626

FILED  
Apr 30, 2004  
Secretary of State

Entity Name: LIBERTY ACQUISITIONS AND INVESTMENTS, INC.

**Current Principal Place of Business:**

2916 OXFORD STREET,STE.100  
ORLANDO, FL 328036821

**New Principal Place of Business:**

**Current Mailing Address:**

2916 OXFORD STREET,STE.100  
ORLANDO, FL 328036821

**New Mailing Address:**

FEI Number: 59-3604389      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

DYER, DAVID A  
2916 OXFORD STREET,STE.100  
ORLANDO, FL 328036821

**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: DYER, DAVID  
Address: 2916 OXFORD STREET  
City-St-Zip: ORLANDO, FL 32803

Title: V ( ) Delete  
Name: RAY, JAMES  
Address: DMB 101  
City-St-Zip: MELBOURNE, FL 32901

Title: D ( ) Delete  
Name: BULLION, LISA  
Address: 504 1/2 S OSCEOLA AVENUE  
City-St-Zip: ORLANDO, FL 32801

Title: D ( ) Delete  
Name: ECKERT, MARK  
Address: 804 MONTANA STREET  
City-St-Zip: ORLANDO, FL 32803

Title: D ( ) Delete  
Name: WARMKE, JAMES  
Address: 914 W NEW HAMPSHIRE ST  
City-St-Zip: ORLANDO, FL 32804

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: V (X) Change ( ) Addition  
Name: RAY, JAMES  
Address: PMB 101  
City-St-Zip: MELBOURNE, FL 32901

Title: D (X) Change ( ) Addition  
Name: BULLION, LISA  
Address: 4727 RAYMAR DRIVE  
City-St-Zip: ORLANDO, FL 32839

Title: D (X) Change ( ) Addition  
Name: ECKERT, MARK  
Address: 3041 GREENMOUNT ROAD  
City-St-Zip: ORLANDO, FL 32806

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: JAMES WARMKE

D

04/30/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date