

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S93947

FILED  
Apr 26, 2004  
Secretary of State

Entity Name: NTW CONSULTING, CORPORATION

## Current Principal Place of Business:

4416 NW 77 TERRACE  
GAINESVILLE, FL 32606 US

## New Principal Place of Business:

1722 ASTOR FARMS PLACE  
SANFORD, FL 32771 US

## Current Mailing Address:

4416 NW 77 TERRACE  
GAINESVILLE, FL 32606 US

## New Mailing Address:

1722 ASTOR FARMS PLACE  
SANFORD, FL 32771 US

FEI Number: 59-3105783

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WAGLOW, NANCY T CO-OWNE  
4416 NW 77 TERRACE  
GAINESVILLE, FL 32606 US

## Name and Address of New Registered Agent:

WAGLOW, NANCY T OWNER  
1722 ASTOR FARMS PLACE  
SANFORD, FL 32771 US

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: NANCY WAGLOW

04/26/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: WAGLOW, NANCY T  
Address: 4416 NW 77 TERRACE  
City-St-Zip: GAINESVILLE, FL 32606 US

Title: D ( ) Delete  
Name: CRAWFORD, CARLY M  
Address: 4416 NW 77TH TERRACE  
City-St-Zip: GAINESVILLE, FL 32606 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: WAGLOW, NANCY T  
Address: 1722 ASTOR FARMS PLACE  
City-St-Zip: SANFORD, FL 32771 US

Title: D (X) Change ( ) Addition  
Name: WAGLOW, RICK  
Address: 1722 ASTOR FARMS PLACE  
City-St-Zip: SANFORD, FL 32771 US

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: NANCY WSGLOW

OWNE

04/26/2004

Electronic Signature of Signing Officer or Director

Date