

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V39588

Entity Name: CAPRICORN INVESTMENT CORPORATION, INC.

FILED  
Apr 30, 2004  
Secretary of State

**Current Principal Place of Business:**

5907 BEVERLY DR  
HUDSON, FL 34667

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 39332  
FORT LAUDERDALE, FL 33339 US

**New Mailing Address:**

5907 BEVERLY DRIVE  
HUDSON, FL 34667 US

FEI Number: 59-3165568

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DEEGAN, DARLENE  
5907 BEVERLY DT  
HUDSON, FL 34667 US

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

DEEGAN, DARLENE  
5907 BEVERLY DR  
HUDSON, FL 34667 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: DARLENE DEEGAN

04/30/2004

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: DPTS ( ) Delete  
Name: DEEGAN, DARLENE  
Address: P.O. BOX 39332  
City-St-Zip: FORT LAUDERDALE, FL 33339 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: DPTS (X) Change ( ) Addition  
Name: DEEGAN, DARLENE  
Address: 5907 BEVERLY DR.  
City-St-Zip: HUDSON, FL 34667 US

Title: VP ( ) Change (X) Addition  
Name: PANESON, THEODORE M II  
Address: P.O. BOX 39332  
City-St-Zip: FT. LAUDERDALE, FL 33339

I hereby certify that the information supplied with this filing does not qualify 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: DARLENE DEEGAN

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04/30/2004

Electronic Signature of Signing Officer or Director

Date