

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V55941

FILED
Jan 21, 2004
Secretary of State

Entity Name: FLORIDA MANAGEMENT CONSULTANTS, P.A.

Current Principal Place of Business:

780 US HWY #1
STE 201
VERO BEACH, FL 32962

New Principal Place of Business:

Current Mailing Address:

780 US HWY #1
STE 201
VERO BEACH, FL 32962

New Mailing Address:

FEI Number: 65-0375881

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PERKINS, TED H
1021 INDIAN MOUND TRAIL
VERO BCH., FL 32963 US

Name and Address of New Registered Agent:

PERKINS, TED H
780 US HWY #1
STE 201
VERO BCH., FL 32962 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:

01/21/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PERKINS, SUSAN N,
Address: 780 US HWY #1, STE 201
City-St-Zip: VERO BEACH, FL 32962

Title: D () Delete
Name: PERKINS, TED H,
Address: 780 US HWY #1, STE 201
City-St-Zip: VERO BEACH, FL 32962

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: TED H. PERKINS

D

01/21/2004

Electronic Signature of Signing Officer or Director

Date