

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000005525

Entity Name: MAAR ASSOCIATES, INC.

FILED
Jan 08, 2004
Secretary of State

Current Principal Place of Business:

2608 STEPHENSON DR.
WILMINGTON, DE 19808

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 655
NEWARK, DE 197150655

New Mailing Address:

FEI Number: 51-0188921 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAYNE, TED M
209 COTTORO LANE
ST. AUGUSTINE, FL 32086 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: CP () Delete
Name: THOMAS, RONALD A
Address: 2608 STEPHENSON DRIVE
City-St-Zip: WILMINGTON, DE 19808

Title: VCV () Delete
Name: BILLY, JESSICA T
Address: 1206 JANICE DRIVE
City-St-Zip: NEWARK, DE 19713

Title: DT () Delete
Name: THOMAS, CHRISTOPHER B
Address: 7 DUNBAR DRIVE
City-St-Zip: NEWARK, DE 19711

Title: D () Delete
Name: THOMAS, MARY S
Address: 3953 ST. ARMENS CIRCLE
City-St-Zip: MELBOURNE, FL 32934

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: RONALD A. THOMAS

PRES

01/08/2004

Electronic Signature of Signing Officer or Director

_____ Date