

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P20939

FILED
Mar 23, 2004
Secretary of State

Entity Name: CAGLEY & ASSOCIATES, INC.

Current Principal Place of Business:

6141 EXECUTIVE BLVD.
ROCKVILLE, MD 20852

New Principal Place of Business:

Current Mailing Address:

6141 EXECUTIVE BLVD.
ROCKVILLE, MD 20852

New Mailing Address:

FEI Number: 52-1432994 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHMITT, RONALD
425 ROSSETTI CIRCLE NORTH
NOKOMIS, FL 34275 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: PTD () Delete
Name: CAGLEY, JAMES R.,
Address: 11312 HUNTOVER DR.
City-St-Zip: ROCKVILLE, MD

Title: S () Delete
Name: CAGLEY, SHARON K.R.,
Address: 11312 HUNTOVER DR.
City-St-Zip: ROCKVILLE, MD

Title: VD () Delete
Name: CAMP, DANIEL
Address: 12 SNUG HILL COURT
City-St-Zip: POTOMAC, MD 20854

Title: VD () Delete
Name: MALITS, FRANK S
Address: 710 MILESTONE DRIVE
City-St-Zip: SILVER SPRING, MD 20904

Title: VD () Delete
Name: ORSAK, DEBRETHANN R C
Address: 11138 STEPHALEE LANE
City-St-Zip: N BETHESDA, MD 20852

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:

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: DEBRETHANN R. CAGLEY ORSAK

VP

03/23/2004

Electronic Signature of Signing Officer or Director

_____ Date