

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000039587

FILED  
Apr 20, 2004  
Secretary of State

Entity Name: ACUMEN, INC.

**Current Principal Place of Business:**

210 SEAGULL LANE  
SARASOTA, FL 34236

**New Principal Place of Business:**

426 ADIRONDACK DRIVE  
CORONA, CA 92881

**Current Mailing Address:**

210 SEAGULL LANE  
SARASOTA, FL 34236

**New Mailing Address:**

P.O. BOX 77742  
CORONA, CA 92877-014

FEI Number: 65-0670567

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CLASP INC.  
3001 TAMIAMI TRAIL NORTH  
NAPLES, FL 34103 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: PD ( ) Delete  
Name: DUFOUR, MARC  
Address: 210 SEAGULL LANE  
City-St-Zip: SARASOTA, FL 34236

Title: VD (X) Delete  
Name: SUZANO, MICHELLE L  
Address: 426 ADIRONDACK DRIVE  
City-St-Zip: CORONA, CA 92881

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

Title: PSTD (X) Change ( ) Addition  
Name: SUZANO, MICHELLE  
Address: 426 ADIRONDACK DRIVE  
City-St-Zip: CORONA, CA 92881

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: MICHELLE L. SUZANO

PRES

04/20/2004

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date