


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90333 047 ***150.00

DOCUMENT # 350469
 1. Entity Name
DYCOM INDUSTRIES, INC.



Principal Place of Business 4440 PGA BLVD SUITE 500 PALM BEACH GARDENS, FL 33410-6542 US	Mailing Address 4440 PGA BLVD SUITE 500 PALM BEACH GARDENS, FL 33410-6542 US
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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04292004 Chg-P CR2E034 (10/03)

City & State	City & State	4. FEI Number 59-1277135	Applied For Not Applicable
Zip	Country	Zip	Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

5. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD FORT LAUDERDALE, FL 33324	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD NIELSEN, STEVE <input type="checkbox"/> Delete 4440 PGA BLVD, SUITE 500 PALM BEACH GARDENS, FL 33410	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D YOUNKIN, RONALD P. <input checked="" type="checkbox"/> Delete 555 GREENLAWN AVE COLUMBUS, OH 43223	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Brennan, Charles M., III <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 15275 Little St. Mary's Road Mettawa, IL 60048
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCOO ESTES, TIMOTHY R <input type="checkbox"/> Delete 4440 PGA BLVD SUITE 500 PALM BEACH GARDENS, FL 33410	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Miller, Michael K. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 4440 PGA Blvd, Suite 500 Palm Beach Gardens, FL 33410
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WERNER, TONY G <input checked="" type="checkbox"/> Delete 12300 LIBERTY BOULEVARD ENGLEWOOD, CO 80112	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Johnson, Kristina M. <input type="checkbox"/> Change <input type="checkbox"/> Addition Duke University, 305 Teer Bldg., Box 90271 Durham, NC 27708
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Coley, Stephen C. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 191 500th Avenue Winnetka, IL 60093
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Schell, Joseph M. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 1604 Bay Avenue Lewes, DE 19958

12. 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  DATE: _____ DAYTIME PHONE #: (561) 627-7171

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR