

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 390570

FILED  
Jan 15, 2004  
Secretary of State

**Entity Name:** SAFEGUARD BUSINESS SYSTEMS OF SOUTH FLORIDA, INC.

**Current Principal Place of Business:**

7301 NW 4TH STREET  
STE. 107A  
PLANTATION, FL 33317 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 17020  
PLANTATION, FL 33318 US

**New Mailing Address:**

FEI Number: 59-1363954      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

TWOHIG, PAUL R  
460 NW 130TH AVENUE  
PLANTATON, FL 33325

**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: P ( ) Delete  
Name: TWOHIG, PAUL R,  
Address: 460 N.W. 130TH AVENUE  
City-St-Zip: FT. LAUDERDALE, FL

Title: S ( ) Delete  
Name: TWOHIG, RUTH D,  
Address: 460 N.W. 130TH AVENUE  
City-St-Zip: FT. LAUDERDALE, FL

Title: V ( ) Delete  
Name: SHUBERT, ANNE T  
Address: 12609 BARWICK RD  
City-St-Zip: BOYNTON BCH, FL 33436

**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:

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: ANNE T SHUBERT

V

01/15/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date