

**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F93000004556

**FILED  
Aug 26, 2004  
Secretary of State**

**Entity Name:** COIN OPERATED PHONES, INC.

**Current Principal Place of Business:**

619 KIRKWOOD TERR. NORTH  
APT 1  
ST. PETERSBURG, FL 33701 US

**New Principal Place of Business:**

**Current Mailing Address:**

619 KIRKWOOD TERR. NORTH  
APT 1  
ST. PETERSBURG, FL 33701 US

**New Mailing Address:**

**FEI Number:** 35-1718255      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

EATON, DAVID A P.A.  
7301 NINTH STREET NORTH  
ST. PETERSBURG, FL 33702 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: CD ( ) Delete  
Name: KNOWLES, MILES V  
Address: 15121 FEIGNER RD.  
City-St-Zip: ROANOKE, IN 46783  
  
Title: P ( ) Delete  
Name: KNOWLES, MILES V.PETER  
Address: 15121 FEIGNER RD.  
City-St-Zip: ROANOKE, IN 46783  
  
Title: V ( ) Delete  
Name: CRISWELL, RONALD G  
Address: 2315 CHARLOTTE AVENUE  
City-St-Zip: FT. WAYNE, IN 47805  
  
Title: ST ( ) Delete  
Name: CRISWELL, CYNTHIA L  
Address: 2315 CHARLOTTE AVENUE  
City-St-Zip: FT. WAYNE, IN 47805

**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: MILES V KNOWLES

CD

08/26/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date