2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2004
Secretary of State

DOCUMENT# H01979

Entity Name: TELEPHONE SUPPORT SYSTEMS OF FLORIDA, INC.

Current Principal Place of Business:

12220 TOWNE LAKE DR, STE 30
FORT MYERS, FL 33913 US

New Principal Place of Business:

Current Mailing Address:

12220 TOWNE LAKE DR, STE 30
FORT MYERS, FL 33913 US

New Mailing Address:

FEI Number: 59-2411756 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ANDREWS, ALBERT W.
12220-30 TOWNE LAKE DRIVE
FORT MYERS, FL 33913 US

Name and Address of New Registered Agent:

ANDREWS, ALBERT W MR
12220-30 TOWNE LAKE DRIVE
FORT MYERS, FL 33913 US

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: ALBERT W. ANDREWS 04/06/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: COLEMAN, HAZEL,
Address: 14687 TRIPLE EAGLE CT
City-St-Zip: FORT MYERS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: COLEMAN, HAZEL MS
Address: 4306 15TH STREET WEST
City-St-Zip: LEHIGH, FL 33971

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: HAZEL COLEMAN MS 04/06/2004
Electronic Signature of Signing Officer or Director Date