

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000008664

Entity Name: ULTIMATE SYSTEMS, INC.

FILED
Apr 29, 2004
Secretary of State

Current Principal Place of Business:

140 ALEXANDRIA BLVD.,STE.E
OVIEDO, FL 32765

New Principal Place of Business:

2521 STONEWOOD ESTATES LN
ORLANDO, FL 32825

Current Mailing Address:

140 ALEXANDRIA BLVD.,STE.E
OVIEDO, FL 32765

New Mailing Address:

2521 STONEWOOD ESTATES LN
ORLANDO, FL 32825

FEI Number: 59-3636003

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRINCE, THOMAS A
140 ALEXANDRIA BLVD.,STE.E
OVIEDO, FL 32765

Name and Address of New Registered Agent:

PRINCE, THOMAS A
2521 STONEWOOD ESTATES LN
ORLANDO, FL 32825

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: THOMAS A. PRINCE

04/29/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PRINCE, THOMAS A
Address: 140 ALEXANDRIA BLVD.,STE.E
City-St-Zip: OVIEDO, FL 32765

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PRINCE, THOMAS A
Address: 2521 STONEWOOD ESTATES LN
City-St-Zip: ORLANDO, FL 32825

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: THOMAS A. PRINCE

D

04/29/2004

Electronic Signature of Signing Officer or Director

Date