

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00902

FILED
Apr 22, 2005
Secretary of State

Entity Name: E-TALK CORPORATION

Current Principal Place of Business:

4040 W ROYAL LANE
STE 100
IRVING, TX 75063 US

New Principal Place of Business:

Current Mailing Address:

4040 W ROYAL LANE
STE 100
IRVING, TX 75063 US

New Mailing Address:

FEI Number: 74-2271956 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: PARKER, TIMOTHY
Address: 4090 WEST ROYAL LANE STE 100
City-St-Zip: IRVING, TX 75063

Title: PD () Delete
Name: SHUTE, SCOTT
Address: 4040 W ROYAL LN. STE 100
City-St-Zip: IRVING, TX 75063

Title: D () Delete
Name: FOSTER, WILLIAM
Address: 32 SADDLEBROOK RD
City-St-Zip: SHERBORN, MA 01770

Title: CP () Delete
Name: SHUTE, SCOTT
Address: 4040 W ROYAL LN STE 100
City-St-Zip: IRVING, TX 75063

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: BARKER, TIMOTHY
Address: 4040 WEST ROYAL LANE STE 100
City-St-Zip: IRVING, TX 75063

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: ASEC () Change (X) Addition
Name: EADS, RICHARD J
Address: 4040 W ROYAL LN STE 100
City-St-Zip: IRVING, TX 75063

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: TIMOTHY BARKER

T

04/22/2005

Electronic Signature of Signing Officer or Director

_____ Date