2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000067952

Entity Name: FLORIDA TELCO SALES, INC.

13281 CORBEL CIRCLE, #2028

FORT MYERS, FL 33907

Address:

City-St-Zip:

FILED Jan 22, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 13750 TREELINE AVE. S 720 N.E. 25TH AVENUE SUITE 7 SUITE 35 FORT MYERS, FL 33913 CAPE CORAL, FL 33909 US **Current Mailing Address: New Mailing Address:** 720 N.E. 25TH AVENUE 13750 TREELINE AVE. S SUITE 7 SUITE 35 FORT MYERS, FL 33913 CAPE CORAL, FL 33909 US FEI Number: 65-0690736 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BACHMAN, BRADLEY S BACHMAN, BRADLEY S 2118 SW 12 AVENUE 2118 SW 12TH AVENUE CAPE CORAL, FL 33991 US CAPE CORAL, FL 33991 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: 01/22/2009 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition BACHMAN, BRAD Name: Name: 2118 SW 12TH AVE. Address: Address: City-St-Zip: CAPE CORAL, FL 33991 City-St-Zip: Title: Title: (X) Change () Addition () Delete Name: BACHMAN, RACHAEL Name: BACHMAN, RACHAEL 2118 SW 12 AVENUE 2118 SW 12TH AVENUE Address: Address: CAPE CORAL, FL 33991 CAPE CORAL, FL 33991 City-St-Zip: City-St-Zip: Title: Title: (X) Change () Addition () Delete SKINNER, DOMINIC Name: SKINNER, DOMINIC Name:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

Address:

City-St-Zip:

SIGNATURE: RACHAEL BACHMAN S 01/22/2009

8876 FALCON POINTE LOOP

FORT MYERS, FL 33912