

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 647257

FILED  
Apr 29, 2004  
Secretary of State

Entity Name: COMPUTER MAPPING SERVICES INC.

## Current Principal Place of Business:

4053 LAKE WORTH ROAD  
LAKE WORTH, FL 33461

## New Principal Place of Business:

## Current Mailing Address:

4053 LAKE WORTH ROAD  
LAKE WORTH, FL 33461

## New Mailing Address:

FEI Number: 59-2469532

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BOSWORTH, BARRY D.  
4053 LAKE WORTH ROAD  
LAKE WORTH, FL 33461

## 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: D ( ) Delete  
Name: BILL BOSWORTH, FRANC, IS F  
Address: 222 ALHAMBRA PLACE  
City-St-Zip: W. PALM BEACH, FL

Title: D ( ) Delete  
Name: GILLETTE, CHRIS  
Address: 398 KNOTTY WOOD LANE  
City-St-Zip: W. PALM BEACH, FL

Title: P ( ) Delete  
Name: BOSWORTH, BARRY D.,  
Address: 1000 PASEO CASTALLA  
City-St-Zip: W. PALM BEACH, FL

Title: ST ( ) Delete  
Name: CAMPBELL, SHEILA M  
Address: 137 MARTIN AVE  
City-St-Zip: LAKE WORTH, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: BILL BOSWORTH, FRANC, IS F  
Address: 222 ALHAMBRA PLACE  
City-St-Zip: W. PALM BEACH, FL 33405

Title: D (X) Change ( ) Addition  
Name: GILLETTE, CHRIS  
Address: 17069 GULF PINE CIRCLE  
City-St-Zip: WELLINGTON, FL 33414

Title: P (X) Change ( ) Addition  
Name: BOSWORTH, BARRY D.,  
Address: 1000 PASEO CASTALLA  
City-St-Zip: W. PALM BEACH, FL 33405

Title: ST (X) Change ( ) Addition  
Name: CAMPBELL, SHEILA M  
Address: 137 MARTIN AVE  
City-St-Zip: LAKE WORTH, FL 33463

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: SHEILA M. CAMBPELL

S/T

04/29/2004

Electronic Signature of Signing Officer or Director

Date