

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000004534

Entity Name: TELOS ONLINE, INC.

FILED
Apr 23, 2004
Secretary of State

Current Principal Place of Business:

4935 ALLISON ST., UNIT 1
ARVADA, CO 80002

New Principal Place of Business:

13980 W. 78TH AVE.
ARVADA, CO 80005

Current Mailing Address:

4935 ALLISON ST., UNIT 1
ARVADA, CO 80002

New Mailing Address:

P.O. BOX 740069
ARVADA, CO 80006

FEI Number: 84-1565241

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CROUCH, DAVID
1932 DREW STREET, STE 3
CLEARWATER, FL 33765 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: PC () Delete
Name: MINNIG, THOMAS W
Address: 4935 ALLISON ST., UNIT 1
City-St-Zip: ARVADA, CO 80002

Title: VD () Delete
Name: GEORGE, R. LAMONT
Address: 4935 ALLISON ST., UNIT 1
City-St-Zip: ARVADA, CO 80002

Title: VD () Delete
Name: CATLETT, MICHAEL A
Address: 4935 ALLISON ST., UNIT 1
City-St-Zip: ARVADA, CO 80002

Title: STVC () Delete
Name: MINNIG, VALERI D
Address: 4935 ALLISON ST., UNIT 1
City-St-Zip: ARVADA, CO 80002

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PC (X) Change () Addition
Name: MINNIG, THOMAS W
Address: P.O. BOX 740669
City-St-Zip: ARVADA, CO 80006

Title: VD (X) Change () Addition
Name: GEORGE, R. LAMONT
Address: P.O. BOX 740669
City-St-Zip: ARVADA, CO 80006

Title: VD (X) Change () Addition
Name: CATLETT, MICHAEL A
Address: P.O. BOX 740669
City-St-Zip: ARVADA, CO 80006

Title: STVC (X) Change () Addition
Name: MINNIG, VALERI D
Address: P.O. BOX 740669
City-St-Zip: ARVADA, CO 80006

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 W. MINNIG

PC

04/23/2004

Electronic Signature of Signing Officer or Director

Date