

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005486

Entity Name: IEC, INC.

FILED
Mar 24, 2004
Secretary of State

Current Principal Place of Business:

7200 LAKE ELLENOR DRIVE, SUITE 201
ORLANDO, FL 32809

New Principal Place of Business:

Current Mailing Address:

7200 LAKE ELLENOR DRIVE, SUITE 201
ORLANDO, FL 32809

New Mailing Address:

FEI Number: 74-2996176

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LINKOUS, STEPHEN
7200 LAKE ELLENOR DRIVE, SUITE 201
ORLANDO, FL 32809

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: CP () Delete
Name: HORNER, HOLLIS L
Address: 8328 LA PLATA LOOP
City-St-Zip: AUSTIN, TX 78737

Title: D () Delete
Name: ROBERTSON, LARRY D
Address: 2484 FM 39 N
City-St-Zip: JEWETT, TX 75846

Title: DV () Delete
Name: MARETT, ROD S
Address: 12910 OAK BEND
City-St-Zip: AUSTIN, TX 78727

Title: S () Delete
Name: SCHMIDT, JASON R
Address: 1896 TAHOE DR.
City-St-Zip: ROCKWALL, TX 75087

Title: T () Delete
Name: WARE, BYRON L
Address: 4639 SPRUCE STREET
City-St-Zip: BELLAIRE, TX 77041

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: REID, JAMES
Address: 21002 NOCONA COVE
City-St-Zip: LAGO VISTA, TX 78645

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: HOLLIS L. HORNER

P

03/24/2004

Electronic Signature of Signing Officer or Director

Date