

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005782

FILED
Mar 31, 2004
Secretary of State

Entity Name: SUBURBAN ANSWERING SERVICE, INC.

Current Principal Place of Business:

38567 U.S. HIGHWAY 19
NORTH PALM HARBOR, FL 34684

New Principal Place of Business:

Current Mailing Address:

38567 U.S. HIGHWAY 19
NORTH PALM HARBOR, FL 34684

New Mailing Address:

FEI Number: 75-3106954

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHEELOCK, GARY K
38567 U.S. HWY. 19, N.
PALM HARBOR, FL 34685 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: PSD () Delete
Name: WHEELOCK, GARY K
Address: 38567 US HWY. 19 N.
City-St-Zip: PALM HARBOR, FL 34684

Title: VD () Delete
Name: WHEELOCK, NANCY J
Address: 38567 US HWY. 19 N.
City-St-Zip: PALM HARBOR, FL 34684

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: GARY K. WHEELOCK

PSD

03/31/2004

Electronic Signature of Signing Officer or Director

Date