

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93546

Entity Name: SER-COM, INC.

FILED
Mar 15, 2007
Secretary of State

Current Principal Place of Business:

3030 WATERFIELD LANE
P O BOX 8081
LAKELAND, FL 33803 US

New Principal Place of Business:

3030 WATERFIELD LANE
LAKELAND, FL 33803 US

Current Mailing Address:

PO BOX 8081
P O BOX 8081
LAKELAND, FL 33802 US

New Mailing Address:

P.O. BOX 8081
P O BOX 8081
LAKELAND, FL 33802 US

FEI Number: 59-2214302

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEAPE, THOMAS E.
3610 JACQUE LEE LANE
LAKELAND, FL 33803 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: VP () Delete
Name: HEAPE, THOMAS E
Address: 3610 JACQUE LEE LANE
City-St-Zip: LAKELAND, FL 33803 US

Title: P () Delete
Name: HEAPE, KENETHA S
Address: 3610 JACQUE LEE LANE
City-St-Zip: LAKELAND, FL 33803 US

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 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.

SIGNATURE: KENETHA S. HEAPE

P

03/15/2007

Electronic Signature of Signing Officer or Director

Date