

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 28, 2004  
Secretary of State**

DOCUMENT# F97000001976

Entity Name: DOVE COMMUNICATIONS OF ILLINOIS, INC.

**Current Principal Place of Business:**

2028 RT 37 S.  
PO BOX 1010  
MARION, IL 62959

**New Principal Place of Business:**

**Current Mailing Address:**

2028 RT 37 S.  
PO BOX 1010  
MARION, IL 62959

**New Mailing Address:**

FEI Number: 37-1317014      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FLORIDA INCORPORATORS, INC.  
1221 BRICKELL AVENUE, STE 900  
MIAMI, FL 33131 US

**Name and Address of New Registered Agent:**

FLORIDA INCORPORATORS, INC.  
8875 HIDDEN RIVER PARKWAY  
SUITE 300  
TAMPA, FL 33637 US

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: \_\_\_\_\_ 04/28/2004  
Electronic Signature of Registered Agent Date

**OFFICERS AND DIRECTORS:**

Title: PCD ( ) Delete  
Name: COONCE, GARTH  
Address: 1817 WOLFF DRIVE  
City-St-Zip: MARION, IL

Title: D ( ) Delete  
Name: COONCE, CHRISTINA  
Address: 1817 WOLFF DRIVE  
City-St-Zip: MARION, IL

Title: D ( ) Delete  
Name: NOLAN, JULIE  
Address: 403 S MARKET STREET  
City-St-Zip: MARION, IL

Title: DS ( ) Delete  
Name: CLARK, VICTORIA M  
Address: 5606 E 117TH STREET  
City-St-Zip: TULSA, OK 74137

Title: T ( ) Delete  
Name: CHANEY, SHANE  
Address: 721 N 21ST STREET  
City-St-Zip: HERRIN, IL 62948

**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:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHANE CHANEY T 04/28/2004  
Electronic Signature of Signing Officer or Director Date