2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2004
Secretary of State

DOCUMENT# G43615

Entity Name: CENTRAL FLORIDA SURVEYS, INC.

Current Principal Place of Business:

379 W MICHIGAN ST #208
ORLANDO, FL 32806

New Principal Place of Business:

Current Mailing Address:

379 W MICHIGAN ST #208
ORLANDO, FL 32806

New Mailing Address:

FEI Number: 59-2305026 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LIVERNOISE, GERALD F.
379 W MICHIGAN ST STE208
ORLANDO, FL 32806

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: DV ( ) Delete
Name: CONKLIN, BRISTOL C.,
Address: 1201 WASHINGTON DRIVE
City-St-Zip: SANFORD, FL

Title: DV ( ) Delete
Name: PORTER, PAUL E.,
Address: 2118 S. PARK AVENUE
City-St-Zip: SANFORD, FL

Title: DVT ( ) Delete
Name: HOLMES, WILLIAM R.,
Address: 543 CORNWALL ROAD
City-St-Zip: WINTER PARK, FL

Title: DP ( ) Delete
Name: LIVERNOISE, GERALD F,
Address: 2920 HOFFNER ROAD
City-St-Zip: ORLANDO, FL 00000,

Title: DVS ( ) Delete
Name: TUCKER, ARTHUR W
Address: 8080 ILLINOIS AVE
City-St-Zip: GROVELAND, FL

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

SIGNATURE: GERALD F. LIVERNOISE DP 01/19/2004

Electronic Signature of Signing Officer or Director — Date