## **2005 FOR PROFIT CORPORATION ANNUAL REPORT**

## Feb 02, 2005 08:00 AM Secretary of State DOCUMENT # H10925 1. Entity Name SUN DATA/PHONE SYSTEMS, INC. Principal Place of Business Mailing Address **7925 SULLY DRIVE** 7925 SULLY DRIVE ORLANDO, FL 32818 ORLANDO, FL 32818 01162005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2428432 Not Applicable \$8.75 Additional Fee Required 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent SULLY, HERBERT H. DO NOT WRITE 7925 SULLY DRIVE ORLANDO, FL 32818 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE\_ Signature, typed or printed name of registered agent and title it applicable. (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE SULLY, HERBERT H. U00000210379 02/02/05-80076-009 150.00 NAME 7925 SULLY DRIVE STREET ADDRESS CITY-ST-ZIP ORLANDO, FL TITLE SULLY, HELEN T. NAME 7925 SULLY DRIVE STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32818 TITLE NAME SULLY, HELEN T. STREET ADDRESS 7925 SULLY DRIVE DO NOT WRITE CITY-ST-ZIP ORLANDO, FL 32818 IN THIS SPACE TITLE NAME SULLY, HERERT H. STREET ADDRESS 7925 SULLY DRIVE CITY-ST-ZIP ORLANDO, FL 32818 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**FILED**