

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H92227

FILED  
Apr 12, 2004  
Secretary of State

Entity Name: COMMERCIAL DEVELOPMENT SERVICES, INC.

## Current Principal Place of Business:

7015 PROFESSIONAL PKWY E.  
SARASOTA, FL 34240

## New Principal Place of Business:

## Current Mailing Address:

46 N. WASHINGTON BLVD., #1  
SARASOTA, FL 34236

## New Mailing Address:

46 N. WASHINGTON BLVD.  
SUITE 1  
SARASOTA, FL 34236

FEI Number: 59-2636477

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PATTERSON, JOHN  
46 N. WASHINGTON BLVD., #1  
SARASOTA, FL 34236 US

## Name and Address of New Registered Agent:

LPS CORPORATE SERVICES, INC.  
46 N. WASHINGTON BLVD.  
SUITE 1  
SARASOTA, FL 34236 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: JOHN PATTERSON

04/12/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PDS ( ) Delete  
Name: COX, JOHN,  
Address: 7015 PROFESSIONAL PKWY E  
City-St-Zip: SARASOTA, FL 34240

Title: VPD ( ) Delete  
Name: COX, JOHN J III  
Address: 7015 PROFESSIONAL PKWY E.  
City-St-Zip: SARASOTA, FL 34240

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: COX, JOHN J  
Address: 7015 PROFESSIONAL PKWY E  
City-St-Zip: SARASOTA, FL 34240

Title: VPD (X) Change ( ) Addition  
Name: COX, JOHN J III  
Address: 7015 PROFESSIONAL PKWY E.  
City-St-Zip: SARASOTA, FL 34240

Title: VST ( ) Change (X) Addition  
Name: SAMPSON, VANESSA  
Address: 7015 PROFESSIONAL PARKWAY EAST  
City-St-Zip: SARASOTA, FL 34240

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: JOHN J. COX

P

04/12/2004

Electronic Signature of Signing Officer or Director

Date