

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 26, 2004 8:00 am
Secretary of State

07-26-2004 90001 006 ***158.75

DOCUMENT # J46829

1. Entity Name
ESSEX COMPUTER SERVICE, INC.



Principal Place of Business
**150 SOUTH PINE ISLAND RD
420
PLANTATION, FL 33324 US**

Mailing Address
**12140 WOODCREST EXECUTIVE DR.
SUITE 300
SAINT LOUIS, MO 63141 US**

34064633



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07012004 Chg-P CR2E034 (10/03)

City & State

City & State

4. FEI Number
65-0000098

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**PD
BOVA, STEPHEN R
2300 COTTONDALE DR STE 250
LITTLE ROCK, AR 72202** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**TS
KALBFEISH, RICHARD T
701 EMERSON RD STE 300
SAINT LOUIS, MO 63141** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**V
HERRERA, OTHEN
2300 COTTONDALE DR. STE 250
LITTLE ROCK, AR 72202** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**Vice President
Michael F Winwood
2300 Cottondale Dr Suite 250
Little Rock AR 72202** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**S
HUDSON, JIM
2300 COTTONDALE DR STE 250
LITTLE ROCK, AR 72202** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**T
MCDANIEL, RON
2300 COTTONDALE DR STE 250
LITTLE ROCK, AR 72202** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing 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: *Richard T. Kelly*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #