2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J50066

FILED Apr 12, 2004 Secretary of State

Entity Name: COMPUTER SUPPORT RESOURCES INCORPORATED

Current Principal Place of Business: New Principal Place of Business:

RR 12 BOX 479-6 192 SE DEERWOOD GLEN LAKE CITY, FL 32025 US LAKE CITY, FL 32025 US

Current Mailing Address: New Mailing Address:

RR 12 BOX 479-6 192 SE DEERWOOD GLEN LAKE CITY, FL 32025 US LAKE CITY, FL 32025 US

FEI Number: 59-2754212 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FRYMAN, MELINDA L
RT 12, BOX 479-6
LAKE CITY, FL 32025
US
FRYMAN, MELINDA L
192 SE DEERWOOD GLEN
LAKE CITY, FL 32025
US
LAKE CITY, FL 32025
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: 04/12/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 VPD () Delete
 Title:
 VPD (X) Change () Addition

 Name:
 FUTCH, HOLLIS V.
 Name:
 FUTCH, HOLLIS V.

 Address:
 RT 3 BOX 27219
 Address:
 229 SE CLARENCE CT

 Address:
 RT 3 BOX 27219
 Address:
 229 SE CLARENCE CT

 City-St-Zip:
 LAKE CITY, FL 32025
 City-St-Zip:
 LAKE CITY, FL 32025

Title: STD () Delete Title: STD (X) Change () Addition

 Name:
 FUTCH, MARY E.
 Name:
 FUTCH, MARY E.

 Address:
 RT 3 BOX 27219
 Address:
 229 SE CLARENCE CT

 City-St-Zip:
 LAKE CITY, FL 33025
 City-St-Zip:
 LAKE CITY, FL 32025

Title: STD () Delete Title: STD (X) Change () Addition

 Name:
 FRYMAN, MELINDA L
 Name:
 FRYMAN, MELINDA L

 Address:
 RT 12, BOX 479-6
 Address:
 192 SE DEERWOOD GLEN

 City-St-Zip:
 LAKE CITY, FL 32025
 City-St-Zip:
 LAKE CITY, FL 32025

Title: PD () Delete Title: PD (X) Change () Addition

Name:FRYMAN, THEODORE AName:FRYMAN, THEODORE AAddress:RT 12 BOX 479-6Address:192 SE DEERWOOD GLENCity-St-Zip:LAKE CITY, FL 32025City-St-Zip:LAKE CITY, FL 32025

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: THEODORE A. FRYMAN PD 04/12/2004