

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J64970

FILED
May 26, 2004
Secretary of State

Entity Name: CHARTER ONE NETWORK, INC.

Current Principal Place of Business:

1202 N. INDIES CIR
VENICE, FL 34292

New Principal Place of Business:

9817 WEDGEWOOD LANE
LEESBURG, FL 34788

Current Mailing Address:

1202 N. INDIES CIR
VENICE, FL 34292

New Mailing Address:

9817 WEDGEWOOD LANE
LEESBURG, FL 34788

FEI Number: 59-2800180

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JENKINS, CAROLYN A
1202 N. INDIES CIRCLE
VENICE, FL 34292

Name and Address of New Registered Agent:

JENKINS, CAROLYN A
9817 WEDGEWOOD LANE
LEESBURG, FL 34788

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: CAROLYN A JENKINS

05/26/2004

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JENKINS, CAROLYN A
Address: 1202 N. INDIES CIRCLE
City-St-Zip: VENICE, FL 34292

Title: STD () Delete
Name: JENKINS, BILLY
Address: 1202 N. INDIES CIRCLE
City-St-Zip: VENICE, FL 34292

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: JENKINS, CAROLYN A
Address: 9817 WEDGEWOOD LANE
City-St-Zip: LEESBURG, FL 34788

Title: STD (X) Change () Addition
Name: JENKINS, BILLY
Address: 9817 WEDGEWOOD LANE
City-St-Zip: LEESBURG, FL 34788

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: CAROLYN A JENKINS

PD

05/26/2004

Electronic Signature of Signing Officer or Director

Date