2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004
Secretary of State

DOCUMENT# J78824

Entity Name: UNITED STATES CELLULAR OPERATING COMPANY OF FT. PIERCE

Current Principal Place of Business:

8410 W. BRYN MAWR AVE.
STE 700
CHICAGO, IL 60631

New Principal Place of Business:

Current Mailing Address:

8410 W. BRYN MAWR AVE.
STE 700
CHICAGO, IL 60631

New Mailing Address:

FEI Number: 36-3525991 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ROONEY, JOHN E
Address: 8410 WEST BRYN MAWR AVENUE, STE 700
City-St-Zip: CHICAGO, IL 606313486

Title: VT ( ) Delete
Name: MEYERS, KENNETH R
Address: 8410 W. BRYN MAWR AVENUE, STE 700
City-St-Zip: CHICAGO, IL 60631

Title: S ( ) Delete
Name: GALLAGHER, KEVIN C
Address: 8410 WEST BRYN MAWR AVENUE, STE 700
City-St-Zip: CHICAGO, IL 606313486

Title: D ( ) Delete
Name: CARLSON, LEROY T JR
Address: 30 N. LASALLE STREET
City-St-Zip: CHICAGO, IL 60602

Title: VP ( ) Delete
Name: WEBER, THOMAS S
Address: 8410 W. BRYN MAWR AVENUE, STE 700
City-St-Zip: CHICAGO, IL 60631

Title: AS ( ) Delete
Name: KROHSE, MARK A
Address: 8410 W. BRYN MAWR AVENUE, STE 700
City-St-Zip: CHICAGO, IL 606313486

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VT (X) Change ( ) Addition
Name: MEYERS, KENNETH R
Address: 8410 W. BRYN MAWR AVENUE, STE 700
City-St-Zip: CHICAGO, IL 606313486

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: MARK A. KROHSE AS 04/29/2004

Electronic Signature of Signing Officer or Director Date