

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Feb 13, 2004 08:00 AM

Secretary of State

DOCUMENT # K11985

1. Entity Name

PRESTIGE COMMUNICATIONS, INC.



Principal Place of Business

326 EASTERN AVE
ST. CLOUD FL 34769

Mailing Address

326 EASTERN AVE
ST. CLOUD FL 34769

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



MOORE

CR2E034 (11/03)

4. FEI Number

59-2871187

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BRIGHT, SR., GLENN R.
326 EASTERN AVE.
ST. CLOUD FL 34769

7. Name and Address of New Registered Agent

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 reappointing)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME BRIGHT, GLENN R. SR
STREET ADDRESS 326 EASTERN AVE
CITY- ST- ZIP SAINT CLOUD FL 34769-2517 ☐ Delete

TITLE ST
NAME BRIGHT, MARJORIE
STREET ADDRESS 326 EASTERN AVE
CITY- ST- ZIP SAINT CLOUD FL 34769-2517 ☐ Delete

TITLE V
NAME BRIGHT, THOMAS L
STREET ADDRESS 4770 HUNTING LODGE ROAD
CITY- ST- ZIP SAINT CLOUD FL 34772-8068 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Change ☐ Addition
000000050063
02/13/04-80048-019 158.75

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Change ☐ Addition

TITLE
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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: Marjorie Bright - Marjorie Bright

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-11-04

Date

Daytime Phone #