

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K12064

FILED
Apr 07, 2009
Secretary of State

Entity Name: FLORIDA PHONE SYSTEMS, INC.

Current Principal Place of Business:

1722 NW 80TH BLVD
#40
GAINESVILLE, FL 32606 US

New Principal Place of Business:

Current Mailing Address:

1722 NW 80TH BLVD
#40
GAINESVILLE, FL 32606 US

New Mailing Address:

FEI Number: 59-2862084

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIUGUID, DENIS D
1722 NW 80TH BLVD
#40
GAINESVILLE, FL 32606 US

Name and Address of New Registered Agent:

CLAUS, DENISE D
1722 NW 80TH BLVD
#40
GAINESVILLE, FL 32606 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: DENISE D CLAUS

04/07/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: DIUGUID, BRAD
Address: 10235 SW. 39TH PLACE
City-St-Zip: GAINESVILLE, FL 32607

Title: VP () Delete
Name: JONES, STEPHEN H
Address: 16122 NW 208TH WAY
City-St-Zip: HIGH SPRINGS, FL 32643

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 exemption stated in Chapter 119, 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: STEPHEN H JONES

VP

04/07/2009

Electronic Signature of Signing Officer or Director

Date