

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# K83796

FILED
Jan 03, 2003
Secretary of State

Entity Name: COMMUNICATION SYSTEMS, INC.

Current Principal Place of Business:

6910 WEST UNIVERSITY AVE.
SUITE 2
GAINESVILLE, FL 326071610 US

New Principal Place of Business:

6910 WEST UNIVERSITY AVENUE
SUITE 2
GAINESVILLE, FL 326071610 US

Current Mailing Address:

6910 WEST UNIVERSITY AVE.
SUITE 2
GAINESVILLE, FL 326071610 US

New Mailing Address:

6910 WEST UNIVERSITY AVENUE
SUITE 2
GAINESVILLE, FL 326071610 US

FEI Number: 59-2945526

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUGOS, DONALD J
6910 WEST UNIVERSITY AVE
SUITE 2
GAINESVILLE, FL 326071610 US

Name and Address of New Registered Agent:

BUGOS, DONALD J
6910 WEST UNIVERSITY AVENUE
SUITE 2
GAINESVILLE, FL 326071610 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:

01/03/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: BUGOS, DONALD J
Address: 6910 WEST UNIVERSITY AVE, SUITE 2
City-St-Zip: GAINESVILLE, FL 326071610 US

Title: VPS () Delete
Name: STEVENS, EDITH Y
Address: 6910 WEST UNIVERSITY AVE, SUITE 2
City-St-Zip: GAINESVILLE, FL 326071610 US

Title: D (X) Delete
Name: LYONS, PETER J
Address: 8413 RIVER BRANCH PLACE
City-St-Zip: SANFORD, FL 327718356 US

Title: D (X) Delete
Name: COBB, MARK D
Address: 601 S HARBOUR ISLAND BLVD. #103
City-St-Zip: TAMPA, FL 336025927 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: BUGOS, DONALD J
Address: 6910 WEST UNIVERSITY AVE, SUITE 2
City-St-Zip: GAINESVILLE, FL 326071610 US

Title: DVPS (X) Change () Addition
Name: STEVENS, EDITH Y
Address: 6910 WEST UNIVERSITY AVE, SUITE 2
City-St-Zip: GAINESVILLE, FL 326071610 US

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: DONALD J. BUGOS

PRES

01/03/2003

Electronic Signature of Signing Officer or Director

Date