

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000059106

FILED  
Apr 21, 2003  
Secretary of State

Entity Name: CONEXCO COMMUNICATIONS, INC.

## Current Principal Place of Business:

5030-78TH AVENUE  
UNIT 11  
PINELLAS PARK, FL 33781

## New Principal Place of Business:

## Current Mailing Address:

100 SECOND AVENUE SOUTH SUITE 1201  
ST PETERSBURG, FL 33701

## New Mailing Address:

FEI Number: 59-3661108

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LECOMPTE, MORRIS A  
100 SECOND AVENUE SOUTH SUITE 1201  
ST PETERSBURG, FL 33701

## 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: DPT ( ) Delete  
Name: ABRAHAMS, ROBERT  
Address: 1934 COVE LANE  
City-St-Zip: CLEARWATER, FL 33764

Title: DVP ( ) Delete  
Name: ABRAHAMS, TY  
Address: 1934 COVE LANE  
City-St-Zip: CLEARWATER, FL 33764

Title: DVP (X) Delete  
Name: PARKER, DARRL  
Address: 1441 WYNDHAM LAKES DRIVE  
City-St-Zip: ODESSA, FL 33556

Title: DMGR ( ) Delete  
Name: ROBBINS, MICHAEL  
Address: 36631 SPRINGS ROAD  
City-St-Zip: FRUITLAND PARK, FL 34731

Title: D ( ) Delete  
Name: GIPE, ROBERT  
Address: 867 INDIAN ROCKS ROAD SOUTH  
City-St-Zip: LARGO, FL 33770

Title: DS ( ) Delete  
Name: LESTER, JUDY  
Address: 613 CEDARWOOD STREET NORTH  
City-St-Zip: SAINT PETERSBURG, FL 33703

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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: ROBERT ABRAHAMS

PRES

04/21/2003

Electronic Signature of Signing Officer or Director

Date