

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000069406

Entity Name: VOCAL MINDS, INC.

FILED
Mar 23, 2004
Secretary of State

Current Principal Place of Business:

3545-1 ST. JOHNS BLUFF ROAD SOUTH
SUITE 318
JACKSONVILLE, FL 32224

Current Mailing Address:

3545-1 ST. JOHNS BLUFF ROAD SOUTH
SUITE 318
JACKSONVILLE, FL 32224

New Principal Place of Business:

1314 CAPE CORAL PARKWAY EAST
SUITE 312
CAPE CORAL, FL 33904

New Mailing Address:

1314 CAPE CORAL PARKWAY EAST
SUITE 312
CAPE CORAL, FL 33904

FEI Number: 65-1031533

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERKINS, TROY D
3545 1 ST. JOHNS RD S
STE 318
JACKSONVILLE, FL 32224 US

Name and Address of New Registered Agent:

PERKINS, TROY D
1314 CAPE CORAL PARKWAY EAST
SUITE 312
CAPE CORAL, FL 33904 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: TROY D. PERKINS

03/23/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PERKINS, TROY D
Address: 3545 1 ST JOHNS BLUFF RD S STE 318
City-St-Zip: JACKSONVILLE, FL 32224

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PERKINS, TROY D
Address: CAPE CORAL PARKWAY EAST, SUITE 312
City-St-Zip: CAPE CORAL, FL 33904 US

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: TROY D. PERKINS

PRES

03/23/2004

Electronic Signature of Signing Officer or Director

Date