

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000087244

FILED
Jul 09, 2004
Secretary of State

Entity Name: FLORIDA LOCAL INTERACTIVE, INC.

Current Principal Place of Business:

400 N ASHLEY DRIVE
STE 1925
TAMPA, FL 33602

New Principal Place of Business:

Current Mailing Address:

10975 BENSON STREET
STE 390
OVERLAND PARK, KS 66210

New Mailing Address:

10540 S RIDGEVIEW RD
OLATHE, KS 66061

FEI Number: 58-2571158

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324 US

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: BRADLEY, WILLIAM F JR
Address: 10540 S. RIDGEVIEW ROAD
City-St-Zip: OLATHE, KS 66061

Title: P () Delete
Name: PATEL, MUKESH
Address: 400 N. ASHLEY DR.,STE. 1925
City-St-Zip: TAMPA, FL 33602

Title: TD () Delete
Name: BUR, ERIC
Address: 10540 S. RIDGEVIEW ROAD
City-St-Zip: OLATHE, KS 66061

Title: D () Delete
Name: HERINGTON, HARRY H
Address: 10540 S. RIDGEVIEW ROAD
City-St-Zip: OLATHE, KS 66061

Title: D () Delete
Name: SOMERHOLDER, SAMUEL R
Address: 10540 S. RIDGEVIEW ROAD
City-St-Zip: OLATHE, KS 66061

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:

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: ERIC J BUR

TD

07/09/2004

Electronic Signature of Signing Officer or Director

Date