2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2004
Secretary of State

DOCUMENT# P00000109005

Entity Name: ADCOM, INC

Current Principal Place of Business:

22121 HWY 331 N
PAXTON, FL 32538

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 5240
PAXTON, FL 32538

New Mailing Address:

FEI Number: 59-3704189 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KEARNS, JOHN (BILL) W
22121 HWY 331 N
PAXTON, FL 32538

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 (X).

OFFICERS AND DIRECTORS:

Title: CT ( ) Delete
Name: KEARNS, JOHN (BILL) W
Address: P.O.BOX 5240
City-St-Zip: PAXTON, FL 32538

Title: PS ( ) Delete
Name: KEARNS, KATHLEEN E
Address: P.O.BOX 5240
City-St-Zip: PAXTON, FL 32538

Title: D ( ) Delete
Name: CORNWELL, BLAINE
Address: P.O.BOX 422
City-St-Zip: JOPLIN, MO 64802

Title: D ( ) Delete
Name: CORNWELL, BOYD
Address: P.O.BOX 422
City-St-Zip: JOPLIN, MO 64802

Title: VP ( ) Delete
Name: SUTHERLAND, GEORGE F
Address: PO BOX
City-St-Zip: DESTIN, FL 32550

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: JOHN (BILL) W KEARNS CT 04/21/2004

Electronic Signature of Signing Officer or Director — Date