

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000004545

FILED
Jan 07, 2004
Secretary of State

Entity Name: ROCK COMMUNICATION SERVICES, INC.

Current Principal Place of Business:

8790 GLASGOW POINTE
DULUTH, GA 30097

New Principal Place of Business:

Current Mailing Address:

8790 GLASGOW POINTE
DULUTH, GA 30097

New Mailing Address:

FEI Number: 59-3691101 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

STALKER, PABLO C
409 MAGPIE COURT
POINCIANA, FL 34759 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VCFO () Delete
Name: BOYLE, GINA S
Address: 8790 GLASGOW POINTE
City-St-Zip: DULUTH, GA 30097

Title: D () Delete
Name: BOYLE, GINA S
Address: 8790 GLASGOW POINTE
City-St-Zip: DULUTH, GA 30097

Title: PD () Delete
Name: BOYLE, KENNETH C
Address: 8790 GLASGOW POINTE
City-St-Zip: DULUTH, GA 30097

Title: CEOD () Delete
Name: HARKEY, MATTHEW R
Address: 3876 WINTERGREEN CT.
City-St-Zip: MARIETTA, GA 30062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SEC (X) Change () Addition
Name: HARKEY, BONNIE E
Address: 3876 WINTERGREEN CT
City-St-Zip: MARIETTA, GA 30062

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: GINA S BOYLE

VCFO

01/07/2004

Electronic Signature of Signing Officer or Director

_____ Date