

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000012243

Entity Name: DMSI HOLDING CO., INC.

FILED
Jan 13, 2004
Secretary of State

Current Principal Place of Business:

5110 EISENHOWER BLVD., SUITE 150
250
TAMPA, FL 33634

Current Mailing Address:

5110 EISENHOWER BLVD., SUITE 150
250
TAMPA, FL 33634

New Principal Place of Business:

5110 EISENHOWER BLVD., SUITE 250
250
TAMPA, FL 33634

New Mailing Address:

5110 EISENHOWER BLVD., SUITE 250
250
TAMPA, FL 33634

FEI Number: 94-3714971

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SPURLOCK, MITCHELL D
5110 EISENHOWER BLVD., SUITE 150
25
TAMPA, FL 33634

Name and Address of New Registered Agent:

SPURLOCK, MITCHELL D
5110 EISENHOWER BLVD., SUITE 250
25
TAMPA, FL 33634

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: MITCHELL D SPURLOCK

01/13/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ORR, COBY W
Address: 5110 EISENHOWER BLVD., SUITE 250
City-St-Zip: TAMPA, FL 33634

Title: VSD () Delete
Name: SPURLOCK, MITCHELL D
Address: 5110 EISENHOWER BLVD., SUITE 250
City-St-Zip: TAMPA, FL 33634

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: COBY W ORR

PRES

01/13/2004

Electronic Signature of Signing Officer or Director

Date