

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000013327

FILED
May 18, 2004
Secretary of State

Entity Name: DMS OVERNIGHT DELIVERIES INC

Current Principal Place of Business:

13831 US HWY 19 N
CLEARWATER, FL 33764

New Principal Place of Business:

13730 A 50TH WAY NORTH
CLEARWATER, FL 33760

Current Mailing Address:

13831 US HWY 19 N
CLEARWATER, FL 33764

New Mailing Address:

13730 A 50TH WAY NORTH
CLEARWATER, FL 33760

FEI Number: 74-3026222

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DENTLER, SCOTT E
4303 HURON LN
CLEARWATER, FL 33762

Name and Address of New Registered Agent:

DENTLER, SCOTT E
3611 102ND PLACE NORTH
CLEARWATER, FL 33762

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: SCOTT E DENTLER

05/18/2004

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: PD () Delete
Name: DENTLER, SCOTT E
Address: 4303 HURON LN.
City-St-Zip: CLEARWATER, FL 33762

Title: V () Delete
Name: VANDEGRIFT GOEBEL, VERA N
Address: 3914 SAN RAFAEL
City-St-Zip: TAMPA, FL 336295807

Title: T () Delete
Name: GOEBEL, BERNARD J
Address: 3914 SAN RAFAEL
City-St-Zip: TAMPA, FL 336295807

Title: S (X) Delete
Name: GOUKER, HAROLD K
Address: 4303 HURON LN.
City-St-Zip: CLEARWATER, FL 33762

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DENTLER, SCOTT E
Address: 3611 102ND PLACE NORTH
City-St-Zip: CLEARWATER, FL 33762

Title: V (X) Change () Addition
Name: GOUKER, HAROLD K
Address: 3611 102ND PLACE NORTH
City-St-Zip: CLEARWATER, FL 33762

Title: T (X) Change () Addition
Name: GOUKER, EVELYN K
Address: 3611 102ND PLACE NORTH
City-St-Zip: CLEARWATER, FL 33762

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: SCOTT E DENTLER

PD

05/18/2004

Electronic Signature of Signing Officer or Director

Date