2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000044054

Entity Name: TELEPLEX, INC.

FILED Jul 27, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

400 SR 436 5703 RED BUG LAKE ROAD

SUITE 202 412

CASSELBERRY, FL 32707 WINTER SPRINGS, FL 32708

Current Mailing Address: New Mailing Address:

400 SR 436 5703 RED BUG LAKE ROAD SUITE 202 412

CASSELBERRY, FL 32707 WINTER SPRINGS, FL 32708

FEI Number: 77-0588278 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HERRING, MICHAEL
162 W SR 434

HERRING, MICHAEL
5703 RED BUG LAKE ROAD

WINTER SPRINGS, FL 32708 US 412
WINTER SPRINGS, FL 32708 US 412

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: MICHAEL HERRING 07/27/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete

 Name:
 HEATH, BRAD

 Address:
 400 SR 436, SUITE 202

 City-St-Zip:
 CASSELBERRY, FL 32707

Title: VS () Delete Name: HERRING, MICHAEL

Address: 400 SR 436, SUITE 202 City-St-Zip: CASSELBERRY, FL 32707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition

Name: HEATH, BRAD

Address: 5703 RED BUG LAKE ROAD # 412 City-St-Zip: WINTER SPRINGS, FL 32708

Title: VS (X) Change () Addition

Name: HERRING, MICHAEL

Address: 5703 RED BUG LAKE ROAD # 412 City-St-Zip: WINTER SPRINGS, FL 32708

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: MICHAEL HERRING VP 07/27/2004