

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000086158

FILED  
Sep 20, 2004  
Secretary of State

**Entity Name:** CELLULAR OUTLET OF CLEARWATER, INC.

**Current Principal Place of Business:**

18562 US HWY. 19 N., STE. A  
CLEARWATER, FL 33764

**New Principal Place of Business:**

**Current Mailing Address:**

18562 US HWY. 19 N., STE. A  
CLEARWATER, FL 33764

**New Mailing Address:**

**FEI Number:** 56-2387542

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THORNHILL, MICHAEL  
18562 US HWY. 19 N., STE. A  
CLEARWATER, FL 33764

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

BURMESTER, PAMELA M  
18562 US HWY. 19 N., STE. A  
CLEARWATER, FL 33764

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:** PAMELA BURMESTER

09/20/2004

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** D ( ) Delete  
**Name:** THORNHILL, MICHAEL  
**Address:** 18562 US HWY. 19 N., STE. A  
**City-St-Zip:** CLEARWATER, FL 33764

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** PD (X) Change ( ) Addition  
**Name:** BURMESTER, PAMELA M  
**Address:** 18562 US HWY. 19 N., STE. A  
**City-St-Zip:** CLEARWATER, FL 33764

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:** PAMELA BURMESTER

PD

09/20/2004

Electronic Signature of Signing Officer or Director

Date