

# **2004 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000132585

**FILED**  
**Jun 14, 2004**  
**Secretary of State**

**Entity Name:** ASCENT COMMUNICATIONS INC.

**Current Principal Place of Business:**

3851 NW 20TH STREET  
COCONUT CREEK, FL 33066

**New Principal Place of Business:**

2200 NW BOCA RATON BLVD  
SUITE 217  
BOCA RATON, FL 33431 US

**Current Mailing Address:**

3851 NW 20TH STREET  
COCONUT CREEK, FL 33066

**New Mailing Address:**

2200 NW BOCA RATON BLVD  
SUITE 217  
BOCA RATON, FL 33431 US

**FEI Number:** 42-1609900

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MACINNES, SCOTT  
3851 NW 20TH STREET  
COCONUT CREEK, FL 33066 US

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

MACINNES, SCOTT  
5005 WILES ROAD  
APT 217  
COCONUT CREEK, FL 33073 US

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:**

06/14/2004

Electronic Signature of Registered Agent

Date

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

**OFFICERS AND DIRECTORS:**

**Title:** D ( ) Delete  
**Name:** MACINNES, SCOTT  
**Address:** 3851 NW 20TH STREET  
**City-St-Zip:** COCONUT CREEK, FL 33066

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

**Title:** D (X) Change ( ) Addition  
**Name:** MACINNES, SCOTT  
**Address:** 5005 WILES ROAD APT 205  
**City-St-Zip:** COCONUT CREEK, FL 33073

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 MACINNES

D

06/14/2004

Electronic Signature of Signing Officer or Director

Date