

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000143987

FILED  
Apr 27, 2004  
Secretary of State

Entity Name: DATA SECURITY INTEGRITY COMPANY

**Current Principal Place of Business:**

14677 MARSH VIEW DRIVE  
JACKSONVILLE BEACH, FL 32250

**New Principal Place of Business:**

**Current Mailing Address:**

14677 MARSH VIEW DRIVE  
JACKSONVILLE BEACH, FL 32250

**New Mailing Address:**

PO BOX 56315  
JACKSONVILLE, FL 32241

FEI Number: 56-2420182

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BLAIR, LANDEN R  
14677 MARSH VIEW DRIVE  
JACKSONVILLE BEACH, FL 32250

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: BLAIR, LANDEN R  
Address: 14677 MARSH VIEW DRIVE  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D ( ) Delete  
Name: VITRY, MARK  
Address: 14765 MARSH VIEW DRIVE  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D ( ) Delete  
Name: KEITHER, MITCHELL  
Address: 96112 SOMERSET DRIVE #902  
City-St-Zip: FERNANDINA BEACH, FL 32034

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: LANDEN R BLAIR

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04/27/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date