

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000120491

FILED  
Apr 30, 2005  
Secretary of State

Entity Name: PEDIA SPEECH SERVICES INC

## Current Principal Place of Business:

5B PARK PLACE  
LAKE PLACID, FL 33852 US

## New Principal Place of Business:

11815 OSPREY POINTE BLVD.  
CLERMONT, FL 34711 US

## Current Mailing Address:

5B PARK PLACE  
LAKE PLACID, FL 33852 US

## New Mailing Address:

11815 OSPREY POINTE BLVD.  
CLERMONT, FL 34711 US

FEI Number: 20-1518200

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COLLEY FINANCIAL SERVICES INC  
209 US 27 SOUTH  
LAKE PLACID, FL 33852 US

## 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: P ( ) Delete  
Name: DOUGHERTY, KIMBERLY A  
Address: 9018 JEFFERSON AVENUE  
City-St-Zip: LAKE PLACID, FL 33852 US

Title: VP ( ) Delete  
Name: DOUGHERTY, BRIAN  
Address: 9018 JEFFERSON AVENUE  
City-St-Zip: LAKE PLACID, FL 33852 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: DOUGHERTY, KIMBERLY A  
Address: 11815 OSPREY POINTE BLVD.  
City-St-Zip: CLERMONT, FL 34711 US

Title: VP (X) Change ( ) Addition  
Name: DOUGHERTY, BRIAN M  
Address: 11815 OSPREY POINTE BLVD.  
City-St-Zip: CLERMONT, FL 34711 US

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: KIMBERLY A. DOUGHERTY

P

04/30/2005

Electronic Signature of Signing Officer or Director

Date