

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000076497

FILED  
Feb 23, 2008  
Secretary of State

Entity Name: TELEMICUS BUILDERS, INC.

## Current Principal Place of Business:

2334 SW 146 LOOP  
OCALA, FL 34473 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 193  
BELLEVIEW, FL 344210193 US

## New Mailing Address:

FEI Number: 26-0444376      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

ST. VINCENT, DAVID J  
2334 SW 146 LOOP  
OCALA, FL 34473 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: GONZALEZ, ADA M  
Address: P.O. BOX 912  
City-St-Zip: BELLEVIEW, FL 344210912 US

Title: VP ( ) Delete  
Name: ST. VINCENT, DAVID J  
Address: P.O. BOX 2041  
City-St-Zip: BELLEVIEW, FL 344212041 US

Title: T (X) Delete  
Name: GONZALEZ, JAMES L  
Address: P.O. BOX 912  
City-St-Zip: BELLEVIEW, FL 344210912 US

Title: S (X) Delete  
Name: ST. VINCENT, RHONDA L  
Address: P.O. BOX 2041  
City-St-Zip: BELLEVIEW, FL 344212041 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: ST VINCENT, DAVID J  
Address: 2334 SW 146 LOOP  
City-St-Zip: OCALA, FL 34473

Title: S (X) Change ( ) Addition  
Name: ST. VINCENT, RHONDA L  
Address: 2334 SW 146 LOOP  
City-St-Zip: OCALA, FL 34473 US

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 exemption stated in Chapter 119, 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: DAVID J ST VINCENT

Electronic Signature of Signing Officer or Director

PRES

02/23/2008

\_\_\_\_\_ Date