2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15900

FILED Sep 15, 2004 Secretary of State

Entity Name: KEY COMMUNICATIONS SERVICE INC.

Entry Name. RET COMMONICATIONS SERVICE, INC.					
Current Principal Place of Business:			New Princ	New Principal Place of Business:	
	NT LINE RD. NY, IN 471510	0109 US			
Current Mailing Address:			New Maili	ng Address:	
2633 GRANT LINE RD. NEW ALBANY, IN 471510109 US					
FEI Number:	35-1438728	FEI Number Applied For ()	I Number Not Appl	icable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
CORPORATE CREATIONS NETWORK INC. 11380 PROSPERITY FARMS RD., #221E PALM BEACH GARDENS, FL 33410 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:					
Electronic Signature of Registered Agent Date					
		(2)(b), F.S., the corporation did not rece	eive the prior notic	e.	
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VPST () RESLER, JAME: 2633 GRANT LIN NEW ALBANY, N	IE RD	Title: Name: Address: City-St-Zip:	CEO (X) Change () Addition HAM, NANCY D JR 1854 SHACKLEFORD COURT # 200 NORCROSS, GA 30093	
Title: Name: Address: City-St-Zip:	P () HARDY, THOMA 12507 HIMMING SELLERSBURG	BIRD WAY	Title: Name: Address: City-St-Zip:	P (X) Change () Addition HARDY, THOMAS A 2633 GRANT LINE ROAD NEW ALBANY, IN 47150	
Title: Name: Address: City-St-Zip:	CEO () HAM, NANCY J 2555 DAVIE RO FORT LAUDERE		Title: Name: Address: City-St-Zip:	VP (X) Change () Addition ARNSON, ERIC 2633 GRANT LINE ROAD NEW ALBANY, IN 47150	
Title: Name: Address: City-St-Zip:	S () RODRIGUEZ, RA 2555 DAVIE ROA FORT LAUDERE	AD SUITE 110	Title: Name: Address: City-St-Zip:	S (X) Change () Addition OLES, DAVID E 1854 SHACKLEFORD COURT # 200 NORCROSS, GA 30093	
Title: Name: Address: City-St-Zip:	T () SCHMID, JUDSO 2555 DAVIE RO FORT LAUDERE	AD SUITE 110	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () HOOVER, MICH. 2555 DAVIE RO. FORT LAUDERE	AD SUITE 110	Title: Name: Address: City-St-Zip:	()Change ()Addition	

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: DAVID E. OLES S 09/15/2004