

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P34273

FILED
Apr 28, 2004
Secretary of State

Entity Name: CONFERENCE-CALL USA, INC.

Current Principal Place of Business:

3 HIGH RIDGE PARK
STAMFORD, CT 06905

New Principal Place of Business:

Current Mailing Address:

3 HIGH RIDGE PARK
STAMFORD, CT 06905

New Mailing Address:

FEI Number: 58-1719813

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: D () Delete
Name: TOW, LEONARD
Address: 3 HIGH RIDGE PARK
City-St-Zip: STAMFORD, CT 06905

Title: PD () Delete
Name: CASEY, JOHN H III
Address: 3 HIGH RIDGE PARK
City-St-Zip: STAMFORD, CT 06905

Title: AS () Delete
Name: COOGLE, VIRGINIA L
Address: 3 HIGH RIDGE PARK
City-St-Zip: STAMFORD, CT 06905

Title: CFO () Delete
Name: ELLIOTT, JERRY
Address: 3 HIGH RIDGE PARK
City-St-Zip: STAMFORD, CT 06905

Title: S () Delete
Name: MITTEN, L. RUSSELL
Address: 3 HIGH RIDGE PARK
City-St-Zip: STAMFORD, CT 06905

Title: T () Delete
Name: ARMOUR, DONALD B
Address: 3 HIGH RIDGE PARK
City-St-Zip: STAMFORD, CT 06905

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:

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: VIRGINIA L. COOGLE

AS

04/28/2004

Electronic Signature of Signing Officer or Director

_____ Date