

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000024027

FILED
Apr 06, 2004
Secretary of State

Entity Name: COMMAND AND CONTROL TECHNOLOGIES CORPORATION

Current Principal Place of Business:

1425 CHAFFEE DRIVE
SUITE 1
TITUSVILLE, FL 32780 US

New Principal Place of Business:

Current Mailing Address:

1425 CHAFFEE DRIVE
SUITE 1
TITUSVILLE, FL 32780 US

New Mailing Address:

FEI Number: 59-3232339

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMONS, PETER C
2800 FAWN LAKE BLVD
MIMS, FL 32754 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: VPT () Delete
Name: BROWN, KEVIN R
Address: 5365 CANGRO STREET
City-St-Zip: COCOA, FL 32926

Title: P () Delete
Name: SIMONS, PETER C.
Address: 2800 FAWN LAKE BLVD
City-St-Zip: MIMS, FL 32754

Title: VPS () Delete
Name: DAVIS, RODNEY D
Address: 28 BOUGAINVILLEA DRIVE
City-St-Zip: COCOA BEACH, FL 32931

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change () Addition
Name: BROWN, KEVIN R
Address: 5365 CANGRO STREET
City-St-Zip: COCOA, FL 32926

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: PETER C. SIMONS

P

04/06/2004

Electronic Signature of Signing Officer or Director

Date