

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000088775

FILED
Mar 15, 2004
Secretary of State

Entity Name: DISTRIBUTED SIMULATION TECHNOLOGY, INC.

Current Principal Place of Business:

11315 CORPORATE BLVD
SUITE 115
ORLANDO, FL 32817 US

New Principal Place of Business:

Current Mailing Address:

11315 CORPORATE BLVD
SUITE 115
ORLANDO, FL 32817 US

New Mailing Address:

FEI Number: 59-3283172

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUMPHREY, DARREN
1022 PALMER STREET
ORLANDO, FL 32801 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: SWINSKI, JOSEPH
Address: 286 EVANS DALE RD.
City-St-Zip: LAKE MARY, FL 32746

Title: D () Delete
Name: ANDREWS, WILLIAM
Address: 4221 WATERMIL AVENUE
City-St-Zip: ORLANDO, FL 32817

Title: CP () Delete
Name: HUMPHREY, DARREN
Address: 1022 PALMER STREET
City-St-Zip: ORLANDO, FL 32801

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:

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: JOE SWINSKI

MR.

03/15/2004

Electronic Signature of Signing Officer or Director

_____ Date