2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005
Secretary of State

DOCUMENT# P95000006144

Entity Name: AUGLINK COMMUNICATIONS, INC.

Current Principal Place of Business:

5 CORDOVA STREET
SAINT AUGUSTINE, FL 32084

New Principal Place of Business:

2155 OLD MOULTRIE RD.
103
SAINT AUGUSTINE, FL 32086

Current Mailing Address:

5 CORDOVA STREET
SAINT AUGUSTINE, FL 32084

New Mailing Address:

2155 OLD MOULTRIE RD.
103
SAINT AUGUSTINE, FL 32086

FEI Number: 59-3290996 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DOBSON & BROWN
66 CUNA STREET
SAINT AUGUSTINE, FL 32084 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: MORISSETTE, MAURICE
Address: 400 NIGHTHAWK LANE
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: D ( ) Delete
Name: ELKUS, DAVID E
Address: 116 SAN RAFAEL RD
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: VP ( ) Delete
Name: LOACH, H. ALEX
Address: 3880 S.R. 214
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: VP ( ) Delete
Name: NUSBAUM, CHARLES D
Address: 3840 HICKORY LANE
City-St-Zip: ST. AUGUSTINE, FL 32086

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:

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. ELKUS D 04/18/2005

Electronic Signature of Signing Officer or Director — Date