## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

## WENT #P95000039380 SOUTHEAST COMMUNICATIONS COMPANY OF CENTRAL FLORIDA, INC.



**FILED** Jan 18, 2005 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

1100 FIFEDWOOD BLVD

1100 FIFI DWOOD BLVD

		LAKE MARY, FL 32746					
C	OO NOT WRITE II	CE	01132005 4. FEI Numb 59-331	No Chg-P	CR2E03	4 (10/03)  Applied For Not Applicable 8.75 Additional ee Required	
Name and Address of Current Registered Agent							
MYERS, JACQUELINE M 1100 FIELDWOOD BLVD. LAKE MARY, FL 32746			DO NOT WRITE IN THIS SPACE				
8. 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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent and title If applicable. (NOTE: Registered Agent signature required when reinstating)  DATE							
FILE NOWIII FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00  9. Election Campaign Finance Trust Fund Contribution.			cing _ \$5	.00 May Be led to Fees		POIL	
10.	OFFICERS AND DIREC						
NAME STREET ADDRESS CITY-ST-ZIP TITLE	PTD MYERS, JACQUELINE M 1100 FIELDWOOD BLVD LAKE MARY, FL 32746	<del>-</del>			Unionio		
NAME STREET ADDRESS CITY-ST-ZIP					01/19/05	-80017-	-003 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				-· — <u>—</u>	NOT W		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN 7	THIS SF	PACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
12. I hereby o	ertify that the information supplied with this fi	ling does not qualify for the exen	nption stated in Se	ction 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statistics; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE MINISTER AND TYPED OR PRINTED NAME OF SIGNING OFFICIATION DIRECTOR