## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Feb 11, 2004 08:00 AM Secretary of State

DOCUMENT # P95000096509  1. Entity Name PAY TELEPHONE OF FLORIDA, INC.  Principal Place of Business  Mailing Address				Secretary of State			
540 N SPOONHILL DR 540 N SPOONHILL DR			10				
BRADENTON, FL 34236 US BRADENTON, FL 34236 US			1 imminent lie roles Milit a	INTEL ANTEL ANTEL ANTEN JUREN ALERI ALERI ES	III N INTERNET PLIMBS		
DO NOT WRITE IN THIS SPACE				01212004 No Chg-P CR2E034 (10/03)  4. FEI Number Applied For			
				65-0627411 Not Applicable  5 Continue to a Status Registed Registed Status Registed Registed Status Registed Regist			
				5. Certificate of Status	Desired Fee Rec		
6. Name and Address of Current Registered Agent					The state of the s	The state of the s	
SHARON D. FORREST 540 N SPOONHILL DR SARASOTA, FL 34236				DO NOT WRITE IN THIS SPACE			
8. The above	named entity submits this statement for the	e purpose of changing its registe	red office or register	ed agent, or both, in the	State of Florida, 1 am familiar	with, and accept	
SIGNA TURE Signature, typed or printed name of or 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 or printed name						4	
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00  Youst Fund Contribution.				.00 May Be ed to Fees		[	
10.	OFFICERS AND DIR	ECTORS					
NAME NAME STREET ADDRESS GITY-ST-ZIP	FORREST, SHARON 540 N SPOONHILL DR SARASOTA, FL 34236				J00000047371	The state of the s	
TITLE					12/04-80038-010	150.00	
NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME				e e e e e e e e e e e e e e e e e e e	en e		
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NAME STREET ADDRESS CITY-ST-ZIP		e e e e e e e e e e e e e e e e e e e					
12. I hereby indicated of the conchanged	certify that the information supplied with this on this report or supplemental report is truporation or the receiver of trustee empower, or on an attachment with an address, wilt	s filing does not qualify for the ene and accurate and that my sign red to execute this report as red all other like empowered.	temption stated in Se lature shall have the ulred by Chapter 60'	ection 119.07(3)(i), Florida same legal effect as if ma 7, Florida Statutes, and th	a Statutes. I further certify that ade under oath; that I am an o lat my name appears in Block	the information fficer or director 10 or Block 11 if	