

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000076543

FILED
Feb 10, 2004
Secretary of State

Entity Name: ACCURATE COMMUNICATION SERVICES, INC.

Current Principal Place of Business:

ROUTE 11, BOX 36202
LAKE CITY, FL 32024 US

New Principal Place of Business:

273 SW MORRELLS CT
SUITE 102
LAKE CITY, FL 32024 US

Current Mailing Address:

ROUTE 11, BOX 36202
LAKE CITY, FL 32024 US

New Mailing Address:

273 SW MORRELLS CT
SUITE 102
LAKE CITY, FL 32024 US

FEI Number: 59-3464761

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOWEN, LAWRENCE D
ROUTE 11, BOX 36202
LAKE CITY, FL 32024 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: PT () Delete
Name: BOWEN, LAWRENCE D
Address: ROUTE 11, BOX 36202
City-St-Zip: LAKE CITY, FL 32024 US

Title: VS () Delete
Name: KOTTYAN, NICHOLAS J
Address: ROUTE 11, BOX 36202
City-St-Zip: LAKE CITY, FL 32024 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: BOWEN, LAWRENCE D
Address: 273 SW MORRELLS CT
City-St-Zip: LAKE CITY, FL 32024 US

Title: VS (X) Change () Addition
Name: KOTTYAN, NICHOLAS J
Address: 273 SW MORRELLS CT
City-St-Zip: LAKE CITY, FL 32024 US

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: LAWRENCE D. BOWEN

PT

02/10/2004

Electronic Signature of Signing Officer or Director

Date