**FILED** 

Apr 25, 2003 8:00 am Secretary of State

04-25-2003 90318 009 \*\*\*150.00

## 2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## P97000097376 DOCUMENT #

1. Entity Name

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

NAME

**WESLEY CHAPEL FL 33543** 

LEWIS, HEATHER S

27445 BREAKERS DRIVE

WESLEY CHAPEL FL 33543

COMMUNICATION SOFTWARE TECHNOLOGIES, INC.

			1000	1165			
Principal Place of Business 27445 BREAKERS DRIVE WESLEY CHAPEL FL 33543		Mailing Address PMB #222 303-D BELTLINE PLACE SW			3000000		
US		DECATUR AL 35603				5 1811 1 <b>888</b> 1811 1811 1811 1811	
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES		
City & State		City & State		4.	. FEI Number 59-3478145	Applied For Not Applicable	
Zip	Country	Zip	Country	5.	. Certificate of Status Desired	\$8.75 Additional Fee Required	
	6. Name and Address of Current F	Registered Agent		7.	Name and Address of New Registere	d Agent	
	Name	Name					
Lozier, Daniel R			Stroot A	Street Address (P.O. Box Number is Not Acceptable)			
125 W. R	OMANA ST, SUITE 224		Street A	Street Address (r.o. box Number is Not Acceptable)			
PENSACO	DLA FL 32501						
, <del></del>			City	City Zip Code			
			City		F	Zip Code	
		the purpose of changing its	registered office or	registered a	agent, or both, in the State of Florida. I ar	n familiar with, and accept	
the obligat	tions of registered agent.						
SIGNATURE							
•	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE	: Registered Agent signatu	re required when	n reinstating) DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.			
10.	OFFICERS AND	DIRECTORS	11.	P	ADDITIONS/CHANGES TO OFFICERS AF	ND DIRECTORS IN 11	
TITLE	P	Delete	TITLE			Change Addition	
NAME	TAYLOR, TERRENCE		NAME			C F	
STREET ADDRESS	120 / 110110201102 02/10 /10/10		STREET ADDRESS		1321 Brindwood Lane S.E.		
CITY-ST-ZIP	DECATUR AL 85803		CITY-ST-ZIP	De	ecatur, AL 356		
TITLE	S TANK OF TREATS	☐ Delete	TITLE			Change  Addition	
NAME STREET ADORESS	TAYLOR, TRENT A		NAME STREET ADDRESS		7 71 -11 - 1 0 - 1	- ~ ر	
CITY-ST-ZIP	1802 STRATFORD RD SE		CITY-ST-ZIP	A:	7 Highland Parl	·	
TITLE	EVP	□ Delete	TITLE	pir	mind vow, Hr 33	Change Addition	
NAME	LEWIS, JERRY L	□1 Delete	NAME			□ Onliange □ Audition	
STREET ADDRESS	27445 BREAKERS DRIVE		STREET ADDRESS				

12. I hereby certify that the information supplied with this filling does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME STREET ADDRESS

TITLE

NAME

☐ Delete

Delete

☐ Delete

SIGNATURE:

4/23/03 256-341-0142 Date Davime Phone #

☐ Change

☐ Change

☐ Change

☐ Addition

Addition

☐ Addition