

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000013581

FILED
Apr 30, 2007
Secretary of State

Entity Name: CHARLES POPE CELLULAR COMMUNICATIONS, INC.

Current Principal Place of Business:

6782 W GULF TO LAKE HWY
CRYSTAL RIVER, FL 34429

New Principal Place of Business:

Current Mailing Address:

PO BOX 38
CRYSTAL RIVER, FL 34423

New Mailing Address:

FEI Number: 59-3401573 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LYN, DENISE A
121 N APOPKA AVE
INVERNESS, FL 34450 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: POPE, JULI
Address: PO BOX 2184
City-St-Zip: CRYSTAL RIVER, FL 34423

Title: VP () Delete
Name: POPE, JULI
Address: PO BOX 2184
City-St-Zip: CRYSTAL RIVER, FL 34423

Title: ST () Delete
Name: POPE, JULI
Address: PO BOX 2184
City-St-Zip: CRYSTAL RIVER, FL 34423

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KELLEY, JULI
Address: PO BOX 2184
City-St-Zip: CRYSTAL RIVER, FL 34423

Title: VP (X) Change () Addition
Name: KELLEY, JULI
Address: PO BOX 2184
City-St-Zip: CRYSTAL RIVER, FL 34423

Title: ST (X) Change () Addition
Name: KELLEY, JULI
Address: PO BOX 2184
City-St-Zip: CRYSTAL RIVER, FL 34423

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JULI KELLEY

P

04/30/2007

Electronic Signature of Signing Officer or Director

_____ Date