

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000032146

FILED
Apr 19, 2004
Secretary of State

Entity Name: HERITAGE INTERNATIONAL COMMUNICATIONS, INC.

Current Principal Place of Business:

1600 W. EAU GALLIE BLVD.
MELBOURNE, FL 32935

New Principal Place of Business:

Current Mailing Address:

1600 W. EAU GALLIE BLVD.
MELBOURNE, FL 32935

New Mailing Address:

FEI Number: 59-3501325

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POTTER, WILLIAM C
POTTER, MCCLELLAND, MARKS, & HEALY P.A.
700 S.M BABCOCK ST., #400
MELBOURNE, FL 32901

Name and Address of New Registered Agent:

TOLLEY, WILLIAM R
1600 W EAU GALLIE BLVD
SUITE 201
MELBOURNE, FL 32935

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: WILLIAM R. TOLLEY

04/19/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CARRAWAY, JAMES D
Address: 1600 W. EAU GALLIE BLVD.
City-St-Zip: MELBOURNE, FL 32935

Title: D () Delete
Name: TOLLEY, WILLIAM R
Address: 1600 W. EAU GALLIE BLVD.
City-St-Zip: MELBOURNE, FL 32935

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CARRAWAY, JESSIE J
Address: 4308 WILDWOOD DRIVE
City-St-Zip: AYDEN, NC 28513

Title: PTD (X) Change () Addition
Name: TOLLEY, WILLIAM R
Address: 1600 W. EAU GALLIE BLVD.
City-St-Zip: MELBOURNE, FL 32935

Title: VSD () Change (X) Addition
Name: WARDRON, NANCY L
Address: 170 SEAVIEW STREET
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: D () Change (X) Addition
Name: SANDERS, THOMAS J SR
Address: 331 SEABREEZE DRIVE
City-St-Zip: INDIALANTIC, FL 32903

Title: D () Change (X) Addition
Name: KING, MAXWELL C
Address: 1384 NOLTON HEALTH COURT
City-St-Zip: ROCKLEDGE, FL 32995

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: WILLIAM R. TOLLEY

PTD

04/19/2004

Electronic Signature of Signing Officer or Director

Date