

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000004339

FILED
Jan 06, 2004
Secretary of State

Entity Name: MISOURCE INCORPORATED

Current Principal Place of Business:

405 REO STREET
SUITE 110
TAMPA, FL 33609

New Principal Place of Business:

Current Mailing Address:

405 REO STREET
SUITE 110
TAMPA, FL 33609

New Mailing Address:

FEI Number: 59-3552276

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOOTHE, A D JR.
10626 TAVISTOCK DR
TAMPA, FL 33626

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: VP () Delete
Name: FREEMAN, JOHN
Address: 14834 FEATHER COVE LN
City-St-Zip: CLEARWATER, FL 33762

Title: S () Delete
Name: SPANKE, MATT
Address: 2421 W HORATIO ST., ATP 825
City-St-Zip: TAMPA, FL 33609

Title: T () Delete
Name: JENSEN, CORY
Address: 14798 FEATHER COVE RD
City-St-Zip: CLEARWATER, FL 33762

Title: P () Delete
Name: BOOTHE, A DARVIN JR
Address: 10626 TAVISTOCK DR
City-St-Zip: TAMPA, FL 33626

Title: D (X) Delete
Name: ROSEMURGY, ALEXANDER S
Address: 1600 ROYAL PALM WAY
City-St-Zip: BOCA RATON, FL 33432

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: FREEMAN, JOHN
Address: 8808 GRACEWOOD WAY
City-St-Zip: TAMPA, FL 33626

Title: S (X) Change () Addition
Name: SPANKE, MATT
Address: 1000 W HORATIO #211
City-St-Zip: TAMPA, FL 33606

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CORY JENSEN

T

01/06/2004

Electronic Signature of Signing Officer or Director

Date