


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 02, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P99000051130</b> 1. Entity Name ROGER SCHAFER LONG DISTANCE COMPANIES USA, INC.	
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Principal Place of Business 6473 102ND AVE. N. PINELLAS PARK, FL 33782	Mailing Address 6473 102ND AVE. N. PINELLAS PARK, FL 33782
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**DO NOT WRITE IN THIS SPACE**



04292005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3654848	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent  GROSS, ALAN M ONE PROGRESS PLAZA, NATIONSBANK TOWER STE. 1210 ST. PETERSBURG, FL 33701
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**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS SCHAFER, ROGER 9269 PARK BLVD. SEMINOLE, FL 33777
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SCHAFER, JOEL 9269 PARK BLVD SEMINOLE, FL 33777
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T VANLANDINGHAM, KEN 9269 PARK BLVD SEMINOLE, FL 33777
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

100000353585  
05/03/05-80072-022 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

**SIGNATURE:** *Ken VanLandingham Jr.* **4/29/05 727-451-2083**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #