FILED

Feb 11, 2002 8:00 am

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

SIGNATURE:

P99000089252 **Secretary of State** 1. Entity Name 02-11-2002 90146 042 ***158.75 COMMUNICATION DEVELOPMENT SERVICES, INC. Principal Place of Business Mailing Address 600 FAIRWAY DR 600 FAIRWAY DR SUITE 104 SUITE 104 DEERFIELD BEACH FL 33441 DEERFIELD BEACH FL 33441 2. Principal Place of Business 3. Mailing Address zy westminster Rd. 211 westminster Rd. Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0953232 W. PALM Beach Beach Fl W. PALM Not Applicable Country Zip \$8.75 Additional 5. Certificate of Status Desired Barm Bead Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name DAVId - C. Felton FOLTON, DAVID J Street Address (P.O. Box Number is Not Acceptable) 600 FAIRWAY DR 211 Westminster Rd. SUITE 104 **DEERFIELD BEACH FL 33441** 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 SIGNATURE & FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. CR2E034 (9/01) Delete ■ Addition TITLE TITLE DAVID C. Felton NAME * FELTON, DAVID C NAME zii westminster Rd. 600 FAIRWAY DR SUITE 104 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Beach, FL 33405 CITY-ST-7IP **DEERFIELD BEACH FL 33441** Change ☐ Addition TITLE 🖫 Delete TITLE FELTON, DAVID J NAME NAME STREET ADDRESS 600 FAIRWAY DR STREET ADDRESS CITY-ST-ZIP **DEERFIELD BEACH FL 33441** CITY-ST-ZIP ☐ Change ☐ Delete TITLE ☐ Addition TITLE NAME . . . STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

David C. Felton