

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000096222

Entity Name: GET WIRED INC.

FILED
Mar 08, 2004
Secretary of State

Current Principal Place of Business:

2024 WINTERMERE POINTE DR
WINTER GARDEN, FL 34787 US

New Principal Place of Business:

Current Mailing Address:

2024 WINTERMERE POINTE DR
WINTER GARDEN, FL 34787 US

New Mailing Address:

FEI Number: 59-3626322

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAYNES, VICKI
2024 WINTERMERE POINTE DR
WINTER GARDEN, FL 34787

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: HAYNES, VICKI
Address: 2024 WINTERMERE POINTE DR
City-St-Zip: WINTER GARDEN, FL 34787

Title: DP () Delete
Name: HAYNES, GARY
Address: 2024 WINTERMERE POINTE DR
City-St-Zip: WINTER GARDEN, FL 34787

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PRES (X) Change () Addition
Name: HAYNES, GARY
Address: 2024 WINTERMERE POINTE DR
City-St-Zip: WINTER GARDEN, FL 34787

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: VICKI HAYNES

VP

03/08/2004

Electronic Signature of Signing Officer or Director

Date