2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000107207

Entity Name: FREQUENCY FINDER, INC.

FILED Aug 04, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

109 W. KNAPP AVE.

EDGEWATER, FL 32132

101 DEMOREST SQUARE
STE. E

DEMOREST, GA 30535

Current Mailing Address: New Mailing Address:

109 W. KNAPP AVE.

EDGEWATER, FL 32132

101 DEMOREST SQUARE
STE. E
DEMOREST, GA 30535

FEI Number: 52-2216995 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MONCURE, MOLLY A
109 W. KNAPP AVE.
EDGEWATER, FL 32132

DONOHUE, DONNA
110 MAGNOLIA AVE.
EDGEWATER, FL 32132

EDGEWATER, FL 32132

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: DONNA DONOHUE 08/04/2004

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERO AND DIDECTORO

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCT () Delete Title: PCT (X) Change () Addition

 Name:
 MONCURE, MOLLY A

 Address:
 134 SEA STREET

 City-St-Zip:
 NEW SMYRNA BEACH, FL 32168

 New Smyrna Beach, FL 32168
 City-St-Zip:

 TOCCOA, GA 30577

Title: VCVS () Delete Title: VCVS (X) Change () Addition Name: MONCURE, PETER W Name: MONCURE, PETER W

Address: 134 SEA STREET Address: 8910 DICKS HILL PARKWAY
City-St-Zip: NEW SMYRNA BEACH, FL 32168 City-St-Zip: TOCCOA, GA 30577

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: MOLLY MONCURE PCT 08/04/2004