2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2004
Secretary of State

DOCUMENT# S32522

Entity Name: NATIONAL MEDIA SERVICES, INC.

Current Principal Place of Business:

11605 CLEVELAND AVE
18
FT MYERS, FL 33907 US

New Principal Place of Business:

1705 COLONIAL BLVD.
A-4
FT MYERS, FL 33907 US

Current Mailing Address:

11605 CLEVELAND AVE
18
FT MYERS, FL 33907 US

New Mailing Address:

1705 COLONIAL BLVD.
A-4
FT MYERS, FL 33907 US

FEI Number: 65-0246973 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHAPMAN, THOMAS H.
5091 LEXINGTON BLVD.
FT. MYERS, FL 33919

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: ST ( ) Delete
Name: CURCIO, JOHN A
Address: 15384 FIDDLESTICKS
City-St-Zip: FT MYERS, FL

Title: V ( ) Delete
Name: JOHNSTON, THEODORE
Address: 1347 WALES DRIVE
City-St-Zip: FT. MEYERS, FL

Title: P (X) Delete
Name: CHAPMAN, THOMAS H
Address: 5091 LEXINGTON BLVD
City-St-Zip: FT. MYERS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ST (X) Change ( ) Addition
Name: CHAPMAN, KATHY S
Address: 5091 LEXINGTON BLVD.
City-St-Zip: FT MYERS, FL 33919

Title: P (X) Change ( ) Addition
Name: CHAPMAN, THOMAS H
Address: 5091 LEXINGTON BLVD.
City-St-Zip: FORT MYERS,, FL 33919

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: THOMAS HOWARD CHAPMAN PRES 01/26/2004
Electronic Signature of Signing Officer or Director Date