

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S54323

FILED  
Feb 22, 2004  
Secretary of State

Entity Name: FRONTIER OF CENTRAL FLORIDA, INC.

## Current Principal Place of Business:

1310 N JOHN YOUNG PKWY  
KISSIMMEE, FL 34741 US

## New Principal Place of Business:

## Current Mailing Address:

1310 N JOHN YOUNG PKWY  
KISSIMMEE, FL 34741 US

## New Mailing Address:

FEI Number: 59-3063513

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DANLEY, RICHARD D.  
3501 13TH STREET  
ST CLOUD, FL 34769

## Name and Address of New Registered Agent:

BENNIE F BUTLER  
1310 NN JOHN YOUNG PKWY  
KISSIMMEE, FL 34741

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: BENNIE F BUTLER

02/22/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BUTLER, BENNIE FRITZ,  
Address: 1310 N JOHN YOUNG PKWY  
City-St-Zip: KISSIMMEE, FL 34742

Title: VP ( ) Delete  
Name: BUTLER, WENDI  
Address: PO BOX 421383  
City-St-Zip: KISSIMMEE, FL 347421383

Title: VP ( ) Delete  
Name: BUTLER, SCOTT J  
Address: 2000 RAYMOND  
City-St-Zip: SAINT CLOUD, FL 34769

Title: S (X) Delete  
Name: BUTLER, JUDY B  
Address: 1310 N JOHN YOUNG PKWY  
City-St-Zip: KISSIMMEE, FL 34741

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: BENNIE F BUTLER

PD

02/22/2004

Electronic Signature of Signing Officer or Director

Date