

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V13868

FILED
Jan 12, 2004
Secretary of State

Entity Name: RF SPECIALTIES OF FLORIDA, INC.

Current Principal Place of Business:

33 JOHN SIMS PARKWAY
VALPARAISO, FL 32580 US

New Principal Place of Business:

Current Mailing Address:

33 JOHN SIMS PARKWAY
VALPARAISO, FL 32580 US

New Mailing Address:

FEI Number: 59-3104617

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOISINGTON, WILLIAM K.
33 JOHN SIMS PARKWAY
VALPARAISO, FL 32580 US

Name and Address of New Registered Agent:

HOISINGTON, WILLIAM K.
33 JOHN SIMS PARKWAY
VALPARAISO, FL 32580 US

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: WILLIAM K. HOISINGTON

01/12/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: MCCOY, GENE JR
Address: 3516 53RD ST
City-St-Zip: COLUMBUS, NE 68601

Title: T () Delete
Name: MCCOY, GENE SR
Address: 719 N 2ND
City-St-Zip: HASTINGS, NE 68901

Title: V () Delete
Name: TURNEY, WILLIAM P.
Address: 271 GRANDVIEW
City-St-Zip: VALPORAISO, FL

Title: P () Delete
Name: HOISINGTON, WILLIAM K.
Address: 4706 YOUNG RD
City-St-Zip: CRESTVIEW, FL 32539

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: MCCOY, GENE JR
Address: 1211 TENTH AVENUE
City-St-Zip: CENTRAL CITY, NE 66826

Title: T (X) Change () Addition
Name: MCCOY, GENE SR
Address: 2925 RIO VISTA
City-St-Zip: EMPORIA, KS 66801

Title: V (X) Change () Addition
Name: TURNEY, WILLIAM P.
Address: 1023 STEPHENS DRIVE
City-St-Zip: NICEVILLE, FL 32578

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: WILLIAM K. HOISINGTON

P

01/12/2004

Electronic Signature of Signing Officer or Director

Date