

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000004072

FILED  
Jul 09, 2007  
Secretary of State

Entity Name: FIELD SUPPORT SERVICES, INC.

**Current Principal Place of Business:**

6303 IVY LANE, SUITE 130  
GREENBELT, MD 20770

**New Principal Place of Business:**

**Current Mailing Address:**

6303 IVY LANE, SUITE 130  
GREENBELT, MD 20770

**New Mailing Address:**

FEI Number: 92-0172363      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DR.  
SUITE 4  
WESTON, FL 33331 US

**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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: C ( ) Delete  
Name: AMBROSE, RICHARD  
Address: 6303 IVY LANE, SUITE 130  
City-St-Zip: GREENBELT, MD 20770

Title: P ( ) Delete  
Name: BERNARDY, GEORGE  
Address: 6303 IVY LANE, SUITE 130  
City-St-Zip: GREENBELT, MD 20770

Title: S ( ) Delete  
Name: GRAY-KELLER, NANCY  
Address: 3900 C STREET  
City-St-Zip: ANCHORAGE, AK 99503

Title: T ( ) Delete  
Name: BROWN, MIKE  
Address: 3900 C STREET  
City-St-Zip: ANCHORAGE, AK 99503

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

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

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

Title: S (X) Change ( ) Addition  
Name: HARVEY, MUELLER  
Address: 3900 C STREET  
City-St-Zip: ANCHORAGE, AK 99503

Title: T (X) Change ( ) Addition  
Name: HARVEY, MUELLER  
Address: 3900 C STREET  
City-St-Zip: ANCHORAGE, AK 99503

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: GEORGE BERNARDY

P

07/09/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date