

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000003249

FILED
Jan 16, 2008
Secretary of State

Entity Name: E A TECHNICAL SERVICES, INC.

Current Principal Place of Business:

1220 OLD ALPHARETTA ROAD
STE 390
ALPHARETTA, GA 30005

New Principal Place of Business:

Current Mailing Address:

1220 OLD ALPHARETTA ROAD
STE 390
ALPHARETTA, GA 30005

New Mailing Address:

FEI Number: 58-1968340 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: WILSON, DOUGLAS H
Address: 9395 RIVERCLUB PARKWAY
City-St-Zip: DULUTH, GA 30097

Title: VSTD () Delete
Name: HARTER, THOMAS C
Address: 454 SUMMIT OVERLOOK DRIVE
City-St-Zip: DAWSONVILLE, GA 30534

Title: D (X) Delete
Name: RAY, CARL S
Address: 113 BEAUFORT CIRCLE
City-St-Zip: MADISON, MS 39110

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:

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: LORI M. COBB

EA

01/16/2008

Electronic Signature of Signing Officer or Director

_____ Date