# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Feb 20, 2008**
**Secretary of State**

DOCUMENT# K82032

**Entity Name:** TECHNICAL SURVEILLANCE SCIENCES, INC.

**Current Principal Place of Business:**

% DEANNE L GENTILE
9750 W SAMPLE ROAD, STE. A
CORAL SPRINGS, FL 33065

**New Principal Place of Business:**

**Current Mailing Address:**

% DEANNE L GENTILE
P O BOX 9323
POMPANO BEACH, FL 33075

**New Mailing Address:**

**FEI Number: 65-0139140** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

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

GENTILE, DEANNE L
2940 SW 22ND AVE. #718
DELRAY BEACH, FL 33445 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: P/T ( ) Delete
Name: GENTILE, DEANNE L
Address: 2940 SW 22 AVENUE #718
City-St-Zip: DELRAY BCH, FL 33445

Title: D ( ) Delete
Name: MCCOY, PEG
Address: 2481 TWP ROAD, 169
City-St-Zip: CARDINGTON, OH 43315

Title: V ( ) Delete
Name: WIGGINS, LAURIE
Address: 2213 E. HOGAN HOLLOW
City-St-Zip: MARGATE, FL 33063

Title: D ( ) Delete
Name: PATRICIA, PHILLIPS
Address: P.O. BOX 823
City-St-Zip: LITCHFIELD,, AZ 85340

**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 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: LAURIE WIGGINS V 02/20/2008

Electronic Signature of Signing Officer or Director — Date