

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L23483

Entity Name: M.S.C. SERVICES, INC.

**FILED**  
**Mar 13, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

6489 AUTUMN WOODS BLVD.  
NAPLES, FL 34109 US

**New Principal Place of Business:**

**Current Mailing Address:**

1989 TRADE CENTER WAY  
NAPLES, FL 33942 US

**New Mailing Address:**

1989 TRADE CENTER WAY  
NAPLES, FL 34109 US

FEI Number: 65-0159095

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CALYORE, MICHAEL  
1989 TRADE CENTER WAY  
NAPLES, FL 33942 US

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

CALYORE, MICHAEL  
1989 TRADE CENTER WAY  
NAPLES, FL 34109 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: MICHAEL CALYORE

03/13/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D  
Name: CALYORE, MICHAEL  
Address: 6489 AUTUMNWOODS BLVD  
City-St-Zip: NAPLES, FL 34109

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL CALYORE

PRES

03/13/2010

Electronic Signature of Signing Officer or Director

Date