2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000092727

Entity Name: STS MANAGEMENT SERVICES OF FLORIDA, INC.

FILED Apr 29, 2005 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:
	E TAX SOLUTIONS, INC. (ENNEDY BLVD., SUITE 731 L 33609	9455 KOGER BLVD. STE 200 ST PETERSBURG, FL 33702
Current Mailing Address:		New Mailing Address:
	E TAX SOLUTIONS, INC. (ENNEDY BLVD., SUITE 731 L 33609	9455 KOGER BLVD. STE 200 ST PETERSBURG, FL 33702
FEI Number	: 59-3672682 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:		nt: Name and Address of New Registered Agent:
5401 W. K TAMPA, F The above		the purpose of changing its registered office or registered agent, or both,
SIGNATU	RE:	
	Electronic Signature of Registere	d Agent Date
Election Ca	mpaign Financing Trust Fund Contribution (
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	D () Delete GUENTHER, SCOTT 5401 W. KENNEDY BLVD., SUITE 731 TAMPA, FL 33609	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D () Delete MUNYON, CHRISTOPHER 5401 W. KENNEDY BLVD., SUITE 731 TAMPA, FL 33609	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: SCOTT GUENTHER D 04/29/2005