


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 13, 2004 8:00 am
Secretary of State

05-13-2004 90008 040 ***150.00

DOCUMENT # P01000093302	
1. Entity Name NEXGEN CONSULTING, INC.	

Principal Place of Business 3411 CAPITAL MEDICAL DR., STE. 200 TALLAHASSEE, FL 32308 1310 Thomasville Road Tallahassee, FL 32303	Mailing Address 3411 CAPITAL MEDICAL DR., STE. 200 TALLAHASSEE, FL 32308 P.O. Box 14472 Tallahassee, FL 32317
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DO NOT WRITE IN THIS SPACE



03062003 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3745436	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

EGGERT, NICKOLETTE A
215 MILL BRANCH RD
TALLAHASSEE, FL 32308

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Nickolette A. Eggert* Nickolette A. Eggert 5-12-04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EGGERT, CHRISTOPHER 215 MILL BRANCH RD. TALLAHASSEE, FL 32312
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EGGERT, NICKOLETTE A 215 MILL BRANCH RD. TALLAHASSEE, FL 32312
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Nickolette A. Eggert* 5-12-04 850-422-2661
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



Attachment

24675253
#P01000093302

May 12, 2004

Division of Corporations
P.O. Box 6198
Tallahassee, Florida 32314

To Whom It May Concern:

Please accept and see our 2004 form that we downloaded from the internet and note that the address for the Principal Place of Business is not correct. We did not receive the 2004 form in the mail and this may be the reason why. We have merged with another company and our address and name has changed. The correct name is now Aegis Computer Services the Next Generation. The correct physical address is 1310 Thomasville Road, Tallahassee, Florida 32303 and the mailing address is P.O. Box 14472, Tallahassee, Florida 32317.

If you have any questions please feel free to call me at 850-422-2661.

Thank you,

Nikki Eggert
Executive Administrator