

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

Roberts MAY 08 2005

DOCUMENT # P02000032218

1. Entity Name
COMMUNITY BUSINESS SERVICES, INC.



Principal Place of Business
1327 COLORADO ST.
TALLAHASSEE, FL 32304

Mailing Address
1327 COLORADO ST.
TALLAHASSEE, FL 32304

FILED
05 APR 28 PM 12:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



04272005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
04-3673277

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SMITH, ERNEST
1327 COLORADO ST.
TALLAHASSEE, FL 32304

**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

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/28/05
DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
SMITH, ERNEST
1327 COLORADO ST.
TALLAHASSEE, FL 32304

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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500053641905
05/03/05--01008--006 **450.00

**DO NOT WRITE
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:

SIGNATURE TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/05
Date

222-4953
Daytime Phone #