

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000047441

Entity Name: POWELL SERVICES, INC.

FILED
Apr 30, 2005
Secretary of State

Current Principal Place of Business:

13950 N. FLORIDA AVENUE
TAMPA, FL 33613

New Principal Place of Business:

Current Mailing Address:

13950 N. FLORIDA AVENUE
TAMPA, FL 33613

New Mailing Address:

FEI Number: 35-2167917

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHECHT, NEIL S
3426 W. KENNEDY BOULEVARD
TAMPA, FL 33609 US

Name and Address of New Registered Agent:

POWELL, STEPHEN C
13950 N FLORIDA AVE
TAMPA, FL 33613 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: STEPHEN POWELL

04/30/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: POWELL, KENNETH M II
Address: 131 FRIENDLY LANE
City-St-Zip: ASHEVILLE, NC 28806

Title: D (X) Delete
Name: POWELL, WINA G
Address: 131 FRIENDLY LANE
City-St-Zip: ASHEVILLE, NC 28806

Title: D () Delete
Name: POWELL, STEPHEN C
Address: 13030 AMBERLEY COURT #410
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D () Delete
Name: POWELL, KELLY G
Address: 13030 AMBERLEY COURT #410
City-St-Zip: BONITA SPRINGS, FL 34135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: POWELL, KENNETH M II
Address: UNKNOWN
City-St-Zip: UNKNOWN, FL UNKNOWN

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: POWELL, STEPHEN C
Address: 9169 HIGHLAND RIDGE WAY
City-St-Zip: TAMAP, FL 33647

Title: D (X) Change () Addition
Name: POWELL, KELLY G
Address: 9169 HIGHLAND RIDGE WAY
City-St-Zip: TAMPA, FL 33647

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: STEPHEN POWELL

D

04/30/2005

Electronic Signature of Signing Officer or Director

Date