2005 FOR PROFIT CORPORATION

Aug 22, 2005 8:00 am Secretary of State **ANNUAL REPORT DOCUMENT # P04000162412** 08-05-2005 90004 038 ***150.00 1. Entity Name T.S. SERVICE CENTERS, INC. Principal Place of Business Mailing Address 66026074 2800 SE 62ND ST 2800 SE 62ND ST OCALA, FL 34480 OCALA, FL 34480 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07082005 Chg-P CR2E034 (10/03) City & State City & State 4. FE Number Applied For Not Applicable Ζiρ Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HOCKADAY, SANDRA 2800 SE 62ND ST Street Address (P.O. Box Number is Not Acceptable) OCALA, FL 34480 City Zip Code 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. Signitives, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Illgristure required when reinstating) 9. Election Campaign Financing FILE NOWI!! FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Due by September 7, 2005 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE · Delete TITLE ☐ Addition ☐ Change SPAULDING, TIMOTHY. NAME NAME 2800 SE 62ND ST STREET ADDRESS STREET ADDRESS CITY-ST-78 OCALA, FL 34480 CITY-ST-ZIP TITLE Detete ☐ Chance ☐ Addition HAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZP CITY-ST-ZIP TITLE ☐ Delate MLE Change ☐ Addition NAME HALLE STREET MODRESS STREET ADDRESS CITY-ST-ZP CITY-ST-ZIP TITLE C Delete TITLE ☐ Charge ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-51-7P ITILE Delete TELE ☐ Change ☐ Addition MANE STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-S2-71P TITLE Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the examption 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 it made under cath; 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, withful other like empowered.

FILED



August 8, 2005

T.S. SERVICE CENTERS, INC. 2800 SE 62ND ST OCALA, FL 34480

Subject: T.S. SERVICE CENTERS, INC.

Reference Number:

P04000162412

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

Jedy Long

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/JD ANNUAL REPORTS SECTION