2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2005
Secretary of State

DOCUMENT# P30635

Entity Name: GLOBAL SERVANTS, INC.

Current Principal Place of Business:

1750 S. VOLUSIA AVE
#5
ORANGE CITY, FL 32763

New Principal Place of Business:

Current Mailing Address:

1750 S. VOLUSIA AVE
#5
ORANGE CITY, FL 32763

New Mailing Address:

FEI Number: 58-1291607 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RUTLAND, TIM
2062 WEST PRAIRIE CIRCLE
DELTONA, FL 32725 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: RUTLAND, MARK,
Address: 9640 W LAKE RUBY DR
City-St-Zip: WINTER HAVEN, FL 33884

Title: MD ( ) Delete
Name: RUTLAND, TIM,
Address: 2062 WEST PRAIRIE CIRCLE
City-St-Zip: DELTONA, FL

Title: DC ( ) Delete
Name: MOYE, JIM,
Address: 1768 MORRIS LANDERS DR
City-St-Zip: ATLANTA, GA

Title: S ( ) Delete
Name: LOCKETT, LAWRENCE,
Address: 6226 HWY 81E
City-St-Zip: MCDONOUGH, GA 30252

Title: T ( ) Delete
Name: BEACHAM, DOUG
Address: 6701 NW 115TH ST
City-St-Zip: OKLAHOMA CITY, OK 73162

Title: D ( ) Delete
Name: BRANNEN, RONNY
Address: 235 GLYNNSHIRE CT
City-St-Zip: COVINGTON, GA 30016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIM RUTLAND MD 01/13/2005

Electronic Signature of Signing Officer or Director — Date