

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000059372

FILED
Apr 30, 2004
Secretary of State

Entity Name: AUTOMATED PAYROLL AND ACCOUNTING SERVICES, INC.

Current Principal Place of Business:

833 LAGOON DRIVE
OVIEDO, FL 32765 US

New Principal Place of Business:

1575 KNOTTING HILL CT
OVIEDO, FL 32765 US

Current Mailing Address:

833 LAGOON DRIVE
OVIEDO, FL 32765 US

New Mailing Address:

1575 KNOTTING HILL CT
OVIEDO, FL 32765 US

FEI Number: 65-0440006

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JAKUSONAS, ANTHONY
833 LAGOON DRIVE
OVIEDO, FL 32765 US

Name and Address of New Registered Agent:

JAKUSONAS, ANTHONY
1575 KNOTTING HILL CT
OVIEDO, FL 32765 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: ANTHONY JAKUSOVAS

04/30/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDT () Delete
Name: JAKUSOVAS, ANTHONY W
Address: 833 LAGOON DRIVE
City-St-Zip: OVIEDO, FL 32765

Title: VS () Delete
Name: JAKUSOVAS, VICKI A
Address: 833 LAGOO DRIVE
City-St-Zip: OVIEDO, FL 32765

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDT (X) Change () Addition
Name: JAKUSOVAS, ANTHONY W
Address: 1575 KNOTTING HILL CT
City-St-Zip: OVIEDO, FL 32765

Title: VS (X) Change () Addition
Name: JAKUSOVAS, VICKI A
Address: 1575 KNOTTING HILL CT
City-St-Zip: OVIEDO, FL 32765

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: ANTHONY JAKUSOVAS

PDT

04/30/2004

Electronic Signature of Signing Officer or Director

Date