

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2004 8:00 am
Secretary of State

02-09-2004 90059 036 ***158.75

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1. Entity Name
TSG TECHNOLOGIES, INC.



Principal Place of Business
P.O. BOX 15967
SAVANNAH, GA 31416

Mailing Address
P.O. BOX 15967
SAVANNAH, GA 31416

94012314



01082004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 58-2405387	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SPRAGUE, JONATHAN D.
1855 NE 12TH AVE
SUITE C
GAINESVILLE, FL 32641

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 **JONATHAN D. SPRAGUE**

1/09/04

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 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	DVP BEDFORD, DEAN E 1855 NE 12TH AVE SUITE C GAINESVILLE, FL 32641
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS MAYER, DONALD 327 EISENHOWER DR, SUITE 100 SAVANNAH, GA 31406
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDT SPRAGUE, JONATHAN D. 1855 NE 12TH AVE, SUITE C GAINESVILLE, FL 32641
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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: JONATHAN D. SPRAGUE, PRESIDENT

Jonathan D. Sprague

1/09/04 (912) 220-

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # **1871**