

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 304615

FILED  
Apr 12, 2006  
Secretary of State

Entity Name: DIRECTORS SERVICE INCORPORATED

**Current Principal Place of Business:**

3121-44TH AVE, N  
ST PETERSBURG, FL 33714 US

**New Principal Place of Business:**

**Current Mailing Address:**

3121-44TH AVE, N  
ST PETERSBURG, FL 33714 US

**New Mailing Address:**

FEI Number: 59-1155333      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SCHULER, TIMOTHY C  
9075 SEMINOLE BLVD  
SEMINOLE, FL 33772 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: WILLIAMS, ROBIN L.,  
Address: 3530 49TH ST, N  
City-St-Zip: ST PETERSBURG, FL 33710

Title: DV ( ) Delete  
Name: BRETT, TIMOTHY T  
Address: 4810 CENTRAL AVE  
City-St-Zip: ST PETERSBURG, FL 33711

Title: DST ( ) Delete  
Name: BRETT, TERRENCE E  
Address: 4810 CENTRAL AVE  
City-St-Zip: ST PETERSBURG, FL 33711

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DST (X) Change ( ) Addition  
Name: WILLIAMS, ROBIN L.,  
Address: 3530 49TH ST, N  
City-St-Zip: ST PETERSBURG, FL 33710

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

Title: DP (X) Change ( ) Addition  
Name: BRETT, TERRENCE E  
Address: 4810 CENTRAL AVE  
City-St-Zip: ST PETERSBURG, FL 33711

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: ROBIN WILLIAMS

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04/12/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date