2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2005
Secretary of State

DOCUMENT# 465155

Entity Name: GRAPHIC SYSTEMS, INCORPORATED

Current Principal Place of Business:

4493 36TH STREET SW
ORLANDO, FL 32811

New Principal Place of Business:

Current Mailing Address:

4493 36TH STREET SW
ORLANDO, FL 32811

New Mailing Address:

FEI Number: 59-1565971 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WALLACE, ROBERT
537 MARY JESS ROAD
ORLANDO, FL 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: PD ( ) Delete
Name: WALLACE, ROBERT L
Address: 537 MARY JESS RD.
City-St-Zip: ORLANDO, FL

Title: VDS ( ) Delete
Name: WALLACE, BEVERLY B
Address: 537 MARY JESS ROAD
City-St-Zip: ORLANDO, FL

Title: V ( ) Delete
Name: CRAIG, JOHN W
Address: 1000 LENMORE COURT
City-St-Zip: ORLANDO, FL

Title: V ( ) Delete
Name: GALLER, ROBERT J
Address: 1214 LARK PLACE
City-St-Zip: ORLANDO, FL

Title: VP ( ) Delete
Name: HOWARD, PATRICE W
Address: 309 RICHARD PLACE
City-St-Zip: ORLANDO, FL

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:

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: ROBERT L WALLACE PRES 04/14/2005

Electronic Signature of Signing Officer or Director — Date