

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 525664

FILED
Jan 04, 2005
Secretary of State

Entity Name: CONVENTION PLANNING SERVICES, INC.

Current Principal Place of Business:

2453 ORLANDO CENTRAL PKWY
ORLANDO, FL 32809

New Principal Place of Business:

Current Mailing Address:

2453 ORLANDO CENTRAL PKWY
ORLANDO, FL 32809

New Mailing Address:

FEI Number: 59-1723972 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DUANE LATIMER
1950 COVE COLONY RD
MAITLAND, FL 32751 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: CEO () Delete
Name: TATE, WILLIAM A
Address: 2931 SUMMERFIELD RD
City-St-Zip: WINTER PARK, FL 32792

Title: S () Delete
Name: DECKER, SHARON L
Address: 212 ROBIN LEE RD
City-St-Zip: OVIEDO, FL 32765

Title: T () Delete
Name: LATIMER, DUANE A
Address: 1950 COVE COLONY RD.
City-St-Zip: MAITLAND, FL 32751

Title: V () Delete
Name: TATE, HELEN B
Address: 2931 SUMMERFIELD RD
City-St-Zip: WINTER PARK, FL 32792

Title: P () Delete
Name: TATE, JOHN A
Address: 382 COVERED BRIDGE DRIVE
City-St-Zip: OCOEE, FL 34761

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: P (X) Change () Addition
Name: TATE, JOHN A
Address: 202 CALLIOPE STREET
City-St-Zip: OCOEE, FL 34761

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: DUANE LATIMER

T

01/04/2005

Electronic Signature of Signing Officer or Director

Date