2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# 617809

Entity Name: DATA SYSTEMS OF NORTH FLORIDA, INC.

Current Principal Place of Business:

909 NW 87TH DR
GAINESVILLE, FL 32606 US

New Principal Place of Business:

9485 NW 23RD PLACE
GAINESVILLE, FL 32606 US

Current Mailing Address:

P.O. BOX 12665
GAINESVILLE, FL 32604 US

New Mailing Address:

FEI Number: 59-1924151 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

O'CONNOR, SEAN
5024 NW 27TH CT.
GAINESVILLE, FL 32606 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: JONES, STAFFORD
Address: PO BOX 12665
City-St-Zip: GAINESVILLE, FL 32604

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: STAFFORD JONES MR. 05/01/2006

Electronic Signature of Signing Officer or Director Date