

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Dec 08, 2006
Secretary of State**

DOCUMENT# 678359

Entity Name: A.F.C. SYSTEMS, INC.

Current Principal Place of Business:

8419 SUNSTATE STREET
TAMPA, FL 33634 US

New Principal Place of Business:

Current Mailing Address:

8419 SUNSTATE STREET
TAMPA, FL 33634 US

New Mailing Address:

FEI Number: 59-2011904 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, DAVID T
200 1ST AVENUE
UNIT 311
ST. PETERSBURG, FL 33706 US

Name and Address of New Registered Agent:

ANDERSON, DAVID T
8419 SUNSTATE STREET
TAMPA, FL 33634 US

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: _____ 12/08/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PCEO () Delete
Name: ANDERSON, DAVID T
Address: 200 1ST. AVENUE, UNIT 311
City-St-Zip: ST. PETERSBURG, FL 33706 US

Title: SECT () Delete
Name: HIGBEE, R A
Address: 501 EAST KENNEDY BLVD, SUITE 1700
City-St-Zip: TAMPA, FL 33602 US

Title: COO () Delete
Name: NAIL, DAVID A
Address: 4010 VALRICO GROVE DRIVE
City-St-Zip: VALRICO, FL 33594 US

Title: CFO () Delete
Name: NAIL, DAVID A
Address: 4010 VALRICO GROVE DRIVE
City-St-Zip: VALRICO, FL 33594

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO (X) Change () Addition
Name: ANDERSON, DAVID T
Address: 8419 SUNSTATE STREET
City-St-Zip: TAMPA, FL 33634 US

Title: SECT (X) Change () Addition
Name: MURRAY, JACK
Address: 1700 MACDILL AVE, SUITE 220
City-St-Zip: TAMPA, FL 33629 US

Title: COO (X) Change () Addition
Name: NAIL, DAVID A
Address: 8419 SUNSTATE STREET
City-St-Zip: TAMPA, FL 33634 US

Title: CFO (X) Change () Addition
Name: NAIL, DAVID A
Address: 8419 SUNSTATE STREET
City-St-Zip: TAMPA, FL 33634

Title: CHRM () Change (X) Addition
Name: BURTRON, STEWART
Address: 1700 MACDILL AVE, SUITE 220
City-St-Zip: TAMPA, FL 33629

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: DAVID A. NAIL COO 12/08/2006
Electronic Signature of Signing Officer or Director Date