

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jan 29 1997 8:00am
Secretary of State

DOCUMENT # 835418 (5)
1. Corporation Name
TECHNOLOGY SERVICE GROUP, INC.



Principal Place of Business Mailing Address
20 MANSELL COURT, EAST SUITE 200
ROSWELL GA 30076 US
20 MANSELL COURT, EAST SUITE 200
ROSWELL GA 30076-4814 US

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report
21	26	11/18/1975	02/20/1996
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. FEI Number	Applied For
22	27	59-1637426	Not Applicable
City & State	City & State	5. Certificate of Status Desired	\$8.75 Additional Fee Required
23	28	<input type="checkbox"/>	\$5.00 May Be Added to Fees
Zip	Country	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>
24	25	29	30
7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of person or persons in place of registered agent and file if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SVT	1.1 TITLE	D
NAME	THOMPSON, WILLIAM H.	1.2 NAME	Robert M. Davies
STREET ADDRESS	20 MANSELL COURT, EAST, SUITE 200	1.3 STREET ADDRESS	411 West Putnam Avenue
CITY- ST- ZIP	ROSWELL GA	1.4 CITY- ST- ZIP	Greenwich CT
TITLE	PD	2.1 TITLE	D
NAME	BISCEGLIA, VINCENT C.	2.2 NAME	D. Thomas Abbott
STREET ADDRESS	20 MANSELL COURT, EAST, SUITE 200	2.3 STREET ADDRESS	455 Park Avenue
CITY- ST- ZIP	ROSWELL GA	2.4 CITY- ST- ZIP	Ny Ny 10022
TITLE	AS	3.1 TITLE	V
NAME	BARZUN, ROGER	3.2 NAME	Darrell Bartussek
STREET ADDRESS	60 HUBBARD STREET	3.3 STREET ADDRESS	20 Mansell Court East, Suite 200
CITY- ST- ZIP	CONCORD MA	3.4 CITY- ST- ZIP	Roswell GA
TITLE	D	4.1 TITLE	V
NAME	DAVIDSON, CHARLES D.	4.2 NAME	Allen Vugl
STREET ADDRESS	411 WEST PUTNAM AVENUE	4.3 STREET ADDRESS	20 Mansell Court East, Suite 200
CITY- ST- ZIP	GREENWICH CT	4.4 CITY- ST- ZIP	Roswell GA
TITLE	D	5.1 TITLE	V
NAME	ROUSSEL, OLIVER	5.2 NAME	Winton Schriener
STREET ADDRESS	17 RUE DU COLISEE	5.3 STREET ADDRESS	20 Mansell Court East, Suite 200
CITY- ST- ZIP	PARIS FR	5.4 CITY- ST- ZIP	Roswell GA
TITLE	DC	6.1 TITLE	V
NAME	STEADMAN, DAVID R. A.	6.2 NAME	Tom Young
STREET ADDRESS	300 COMMERCIAL STREET, SUITE 1404	6.3 STREET ADDRESS	20 Mansell Court East, Suite 200
CITY- ST- ZIP	BOSTON MA	6.4 CITY- ST- ZIP	Roswell GA

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0011101

CR2E034 (9/96)