


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 15, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # F01000000897	
1. Entity Name CONTRACT CAD SERVICES, INC.	

Principal Place of Business 1120 PINELLAS BAYWAY S STE. 202 SAINT PETERSBURG, FL 33715-1505	Mailing Address 1120 PINELLAS BAYWAY S STE. 202 SAINT PETERSBURG, FL 33715-1505
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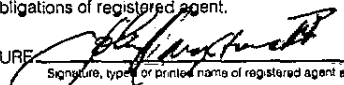
04092005 No Chg-P CR2E034 (10/03)

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4. FEI Number 62-1734516	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  LANGSTON, JOHN IV 1120 PINELLAS BAYWAY SOUTH TIERRA VERDE, FL 33715-1505
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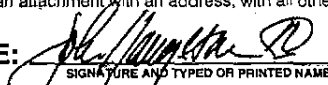
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE:  <u>JOHN LANGSTON IV</u> <u>PRESIDENT</u>	DATE: <u>4-11-05</u>
<small>Signature, type or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LANGSTON, JOHN IV 1120 PINELLAS BAYWAY SOUTH TERRA VERDE, FL 337151505
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LANGSTON, BRANDY 1120 PINELLAS BAYWAY SOUTH TIERRA VERDE, FL 33715
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000308128 04/15/05-80080-019 150.00
<b>DO NOT WRITE IN THIS SPACE</b>

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE:  <u>JOHN LANGSTON IV</u> <u>PRESIDENT</u>	DATE: <u>4-11-05</u>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	

727 579 4498