

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 29, 2004 8:00 am**  
**Secretary of State**

03-29-2004 90390 029 \*\*\*150.00

DOCUMENT # F02000001001

1. Entity Name  
TECHNOLOGY SERVICES GROUP, INC.



Principal Place of Business  
305 PIONEER BLVD  
SPRINGBORO, OH 45066

Mailing Address  
305 PIONEER BLVD  
SPRINGBORO, OH 45066

24030122



2. Principal Place of Business  
444 ALEXANDERSVILLE ROAD  
Suite, Apt. #, etc.

3. Mailing Address  
444 ALEXANDERSVILLE ROAD  
Suite, Apt. #, etc.

03092004 Chg-P CR2E034 (10/03)

City & State  
MIAMISBURG, OH

City & State  
MIAMISBURG, OH

4. FEI Number  
31-1417488  
Applied For  
Not Applicable

Zip  
45342-3658  
Country  
MONTGOMERY

Zip  
45342-3658  
Country  
MONTGOMERY

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324

7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City FL Zip Code

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

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE  
NAME SD  
STREET ADDRESS LANDREVILLE, CHARLES V  
CITY-ST-ZIP 305 PIONEER BLVD  
SPRINGBORO, OH ☐ Delete

TITLE  
NAME CTD  
STREET ADDRESS CURRIN, JAMES M  
CITY-ST-ZIP 305 PIONEER BLVD  
SPRINGBORO, OH ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME ☒ Change ☐ Addition  
STREET ADDRESS 444 ALEXANDERSVILLE ROAD  
CITY-ST-ZIP MIAMISBURG, OH 45342-3658

TITLE  
NAME ☒ Change ☐ Addition  
STREET ADDRESS 444 ALEXANDERSVILLE ROAD  
CITY-ST-ZIP MIAMISBURG, OH 45342-3658

TITLE  
NAME PD  
STREET ADDRESS MICHAEL L. DENNY  
CITY-ST-ZIP 444 ALEXANDERSVILLE ROAD  
MIAMISBURG, OH 45342-3658 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

12. I 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 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:

*James M. Currin*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/22/04

Date

Daytime Phone #

*Jo Ann Beckman CPA 3/16/04*  
BATTTELLE & BATTTELLE LLP 31-0210660