2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2005
Secretary of State

DOCUMENT# F02000001750

Entity Name: MTS ADVISORS, INC.

Current Principal Place of Business:

1064 KERWOOD CIR
OVIEDO, FL 32765

New Principal Place of Business:

1515 SOUTH ORLANDO AVENUE
MAITLAND, FL 32751

Current Mailing Address:

1064 KERWOOD CIR
OVIEDO, FL 32765

New Mailing Address:

1515 SOUTH ORLANDO AVENUE
MAITLAND, FL 32751

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SNEED, MARK T
1064 KERWOOD CIR
OVIEDO, FL 32765 US

Name and Address of New Registered Agent:

SNEED, MARK T
1515 SOUTH ORLANDO AVENUE
MAITLAND, FL 32751 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: MARK T. SNEED 04/07/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CPST ( ) Delete
Name: SNEED, MARK T
Address: 1064 KERWOOD CIR
City-St-Zip: OVIEDO, FL 32765

Title: VC ( ) Delete
Name: SNEED, ALLISON S
Address: 1064 KERWOOD CIR
City-St-Zip: OVIEDO, FL 32765

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPST (X) Change ( ) Addition
Name: SNEED, MARK T
Address: 4703 RED BUD FOREST PLACE
City-St-Zip: LOUISVILLE, KY 40245

Title: VC (X) Change ( ) Addition
Name: SNEED, ALLISON S
Address: 4703 RED BUD FOREST PLACE
City-St-Zip: LOUISVILLE, KY 40245

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARK T. SNEED CPST 04/07/2005
Electronic Signature of Signing Officer or Director Date