

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 19, 2004 8:00 am**  
**Secretary of State**

03-19-2004 90060 025 \*\*\*150.00

**DOCUMENT # F02000005259**

1. Entity Name

ARRAY COMPUTER SOLUTIONS, INC.



Principal Place of Business

7846 FLORADORA DRIVE  
NEW PORT RICHEY FL 34654

Mailing Address

PO BOX 1177  
TARPON SPRINGS FL 34688

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

74-2694018

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KUEHN, JAMES R  
7846 FLORADORA DRIVE  
NEW PORT RICHEY FL 34654

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**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE CP ☐ Delete  
NAME KUEHN, JAMES R  
STREET ADDRESS 2148 CHIANTI PACE, #139  
CITY-ST-ZIP PALM HARBOR FL 34683

TITLE CP ☒ Change ☐ Addition  
NAME KUEHN, JAMES R  
STREET ADDRESS 7846 FLORADORA DR  
CITY-ST-ZIP NEW PORT RICHEY, FL 34654

TITLE DVST ☐ Delete  
NAME KUEHN, DONNA R  
STREET ADDRESS 2148 CHIANTI PACE, #139  
CITY-ST-ZIP PALM HARBOR FL 34683

TITLE DVST ☒ Change ☐ Addition  
NAME KUEHN, DONNA R  
STREET ADDRESS 7846 FLORADORA DR  
CITY-ST-ZIP NEW PORT RICHEY, FL 34654

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

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 R. Kuehn JAMES R. KUEHN

3/17/04

(727) 857-0309

Date

Daytime Phone #