## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F02000005469

Address: City-St-Zip:

Entity Name: TOTAL FLEET SOLUTIONS, INC.

FILED Jan 18, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2108 PIONEER PKWY, WEST, STE. 113 ARLINGTON, TX 76013 **Current Mailing Address: New Mailing Address:** 2108 PIONEER PKWY, WEST, STE. 113 ARLINGTON, TX 76013 FEI Number: 75-2557969 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ALPER, HARVEY M ESQ 112 WEST CITRUS STREET ALTAMONTE SPRINGS, FL 32714 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition SUTTER, EDWARD T Name: Name: 4003 THREE OAKS DRIVE Address: Address: City-St-Zip: ARLINGTON, TX 76010 City-St-Zip: Title: Title: DST () Delete () Change () Addition Name: SUTTER, MARY JANELLE Name: 4003 THREE OAKS DRIVE Address: Address: ARLINGTON, TX 76010 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: DVP DVP (X) Change ( ) Addition SUTTER, HANFORD ANDREW SUTTER, HANFORD ANDREW Name: Name: 1760 HIGHLAND DRIVE 123 STONEHILL DRIVE Address: Address: City-St-Zip: LONGWOOD, FL 32750 City-St-Zip: MAITLAND, FL 32751 Title: VΡ () Delete Title: () Change () Addition SUTTER, MARY JANELLE Name: Name: Address: 4003 THREE OAKS DRIVE Address: City-St-Zip: ARLINGTON, TX 76016 City-St-Zip: Title: Title: () Delete ASEC ( ) Change (X) Addition Name: Name: SUTTER, NORINE R

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.

Address:

City-St-Zip:

123 STONEHILL DRIVE

MAITLAND, FL 32751

SIGNATURE: MARY JANELLE SUTTER VP 01/18/2005