

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001457

FILED  
Feb 02, 2005  
Secretary of State

**Entity Name:** TMS FIELD SERVICES, INCORPORATED

**Current Principal Place of Business:**

1392 MASSEY ROAD  
NEWTON GROVE, NC 28366

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 189  
NEWTON GROVE, NC 28366

**New Mailing Address:**

**FEI Number:** 82-0571021

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PARKER, JR., SHELTON  
301 ROSERY ROAD NE  
APT. 1901  
LARGO, FL 33770 US

**Name and Address of New Registered Agent:**

ROMEUS, JULFAT  
5232 LIMELIGHT CR. 3  
ORLANDO, FL 32839 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: JULFAT ROMEUS

02/02/2005

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: OUTLAW, WILLIAM F  
Address: 296 RED HILL ROAD  
City-St-Zip: MT. OLIVE, NC 28365

Title: VP ( ) Delete  
Name: NAUSS, BENJAMIN S  
Address: 128 BROWN PELICAN LOOP  
City-St-Zip: PAWLEY'S ISLAND, SC 29585

Title: ST ( ) Delete  
Name: JONES, BARRY E  
Address: 602 NEUSE RIDGE ROAD  
City-St-Zip: CLAYTON, NC 27520

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: WILLIAM F. OUTLAW

P

02/02/2005

Electronic Signature of Signing Officer or Director

Date