

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000004058

FILED  
Jan 20, 2006  
Secretary of State

**Entity Name:** MANAGEMENT DATA SYSTEMS INTERNATIONAL, INC.

**Current Principal Place of Business:**

1265 OAK INDUSTRIAL LANE  
CUMMING, GA 30041

**New Principal Place of Business:**

**Current Mailing Address:**

9385 NORTH 56TH STREET  
SUITE 301  
TEMPLE TERRACE, FL 33617

**New Mailing Address:**

**FEI Number:** 58-1959336

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RUSSELL, KIM  
9385 NORTH 56TH STREET  
SUITE 301  
TEMPLE TERRACE, FL 33617 US

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

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:**

Title: P ( ) Delete  
Name: PIKE, BOB  
Address: 9385 NORTH 56TH STREET, SUITE 301  
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: VP ( ) Delete  
Name: JILLSON, LISA  
Address: 1265 OAK INDUSTRIAL LANE  
City-St-Zip: CUMMING, GA 30041

Title: ST ( ) Delete  
Name: RUSSELL, KIM  
Address: 9385 NORTH 56TH STREET, SUITE 301  
City-St-Zip: TEMPLE TERRACE, FL 33617

**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 Chapter 119, 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: KIMBERLY H. RUSSELL

CFO

01/20/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date