

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000000075

FILED
Jan 12, 2006
Secretary of State

Entity Name: GSS CONTRACT SERVICES (FALCON), INC.

Current Principal Place of Business:

445 BROAD HOLLOW RD, STE 239
NELVILLE, NY 11747

New Principal Place of Business:

Current Mailing Address:

445 BROAD HOLLOW RD, STE 239
NELVILLE, NY 11747

New Mailing Address:

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

Name and Address of Current Registered Agent:

LEXISNEXIS DOCUMENT SOLUTIONS, INC.
1201 HAYS ST
TALLAHASSEE, FL 32301 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: D () Delete
Name: STIDD, ANDREW L
Address: 445 BROAD HOLLOW RD, STE 239
City-St-Zip: NELVILLE, NY 11747

Title: D () Delete
Name: MANCUSI, CATHERINE
Address: 114 WEST 47TH ST, STE 1715
City-St-Zip: NEW YORK, NY 10036

Title: D () Delete
Name: SCHONLAND, WAYNE
Address: 15 CHERRY TREE LANE
City-St-Zip: KINNELON, NJ 07405

Title: P () Delete
Name: HALLENGREN, HOWARD
Address: 2977 MCFARLANE RD, STE 303
City-St-Zip: COCONUT CREEK, FL 33133

Title: VPT () Delete
Name: MILLER, JACK
Address: 2977 MCFARLANE RD, STE 303
City-St-Zip: COCONUT CREEK, FL 33133

Title: VPS () Delete
Name: HILL, DAVE
Address: 2977 MCFARLANE RD, STE 303
City-St-Zip: COCONUT CREEK, FL 33133

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:

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: ANDREW L. STIDD

DIR

01/12/2006

Electronic Signature of Signing Officer or Director

Date