


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2005 08:00 AM
Secretary of State

DOCUMENT # F04000004072

1. Entity Name
 FIELD SUPPORT SERVICES, INC.



Principal Place of Business
 6303 IVY LANE, SUITE 800
 GREENBELT, MD 20770

Mailing Address
 6303 IVY LANE, SUITE 800
 GREENBELT, MD 20770



02182005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
 92-0172363

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when rehashing) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	C
NAME	AMBROSE, RICHARD
STREET ADDRESS	6303 IVY LANE, SUITE 800
CITY-ST-ZIP	GREENBELT, MD 20770
TITLE	P
NAME	BERNARDY, GEORGE
STREET ADDRESS	6303 IVY LANE, SUITE 800
CITY-ST-ZIP	GREENBELT, MD 20770
TITLE	S
NAME	GRAY-KELLER, NANCY
STREET ADDRESS	3900 C STREET
CITY-ST-ZIP	ANCHORAGE, AK 99503
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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100000258510
 08/10/05-80044-005-150.00

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: George Bernardy 21 FEB 05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #