

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001923

FILED
Mar 20, 2006
Secretary of State

Entity Name: PATRIOT SERVICES CORPORATION

Current Principal Place of Business:

283 GLADWIN
CLAWSIN, MI 48107

New Principal Place of Business:

283 GLADWIN
CLAWSIN, MI 48017

Current Mailing Address:

283 GLADWIN
CLAWSIN, MI 48107

New Mailing Address:

283 GLADWIN
CLAWSIN, MI 48017

FEI Number: 20-0847693

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KECK, BARBARA
2176 HYATT DRIVE
PORT CHARLOTTE, FL 33948 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: POTTER, STEPHEN M
Address: 283 GLADWIN
City-St-Zip: CLAWSIN, MI 48107

Title: VS () Delete
Name: HIIPAKKA, SCOTT
Address: 6142 MAPLEVIEW LANE
City-St-Zip: YPSILANTI, MI 48197

Title: T () Delete
Name: QUISENBERRY, TOM
Address: 283 GLADWIN
City-St-Zip: CLAWSON, MI 48107

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: POTTER, STEPHEN M
Address: 283 GLADWIN
City-St-Zip: CLAWSIN, MI 48107

Title: VS (X) Change () Addition
Name: HIIPAKKA, SCOTT
Address: 424 EAST DAWSON ROAD
City-St-Zip: MILFORD, MI 48381

Title: VT (X) Change () Addition
Name: QUISENBERRY, TOM
Address: 283 GLADWIN
City-St-Zip: CLAWSON, MI 48107

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: SCOTT HIIPAKKA

VT

03/20/2006

Electronic Signature of Signing Officer or Director

_____ Date