## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F05000006698

Entity Name: T.S.I. CONTRACTING SERVICES, INC.

**FILED** Aug 03, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

5295 LAKE POINTE CENTER DR STE J 5295 LAKE POINTE CENTER DR CUMMING, GA 30041

SUITE J

CUMMING, GA 30041

**Current Mailing Address: New Mailing Address:** 

5295 LAKE POINTE CENTER DR STE J 5295 LAKE POINTE CENTER DR CUMMING, GA 30041

SUITE J

CUMMING, GA 30041

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

FEI Number: 58-2365334 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

THOMAS, MARK THOMAS, MARK 10803 JD SMITH TRAIL 10725 GRAYSON CT

JACKSONVILLE, FL 32220 GLEN ST MARY, FL 32040 US 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: 08/03/2007

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: ( ) Delete Title: (X) Change ( ) Addition

SCHUMACKER, STEFFAN SCHUMACHER, STEFFAN Name: Name: 596 GOLDCREST DR Address: 511 FROST LANE Address: City-St-Zip: DAHLONEGA, GA 30533 City-St-Zip: SCOTTSVILLE, KY 42164

( ) Delete Title: Title: (X) Change ( ) Addition

SCHUMACHER, PAMELA Name: SCHUMACKER, PAMELA Name: 596 GOLDCREST DR Address: 511 FROST LANE Address: DAHLONEGA, GA 30533 SCOTTSVILLE, KY 42164 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

Ρ SIGNATURE: STEFFAN SCHUMACHER 08/03/2007