2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15936

Entity Name: NELSON'S SERVICE, INC.

FILED Apr 25, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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3490 TOM'S COURT

GREEN COVE SPRINGS, FL 32043 US

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 609 PO BOX 609

PO BOX 609 PENNEY FARMS, FL 32079 US

PENNEY FARMS, FL 32079 US

FEI Number: 59-2055146 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

NELSON, KIRBY W 3490 TOM'S COURT

GREEN COVE SPRINGS, FL 32043 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: NELSON. ARDELLA, D. Name: NELSON, ARDELLA D. Address: 3490 TOM'S CT. Address: 3490 TOM'S CT.

City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

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

Name: NELSON, ROLAND W, Name: NELSON, ROLAND W

Address: 3490 TOM'S COURT Address: 3490 TOM'S COURT City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

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

Name: NELSON, KIRBY W., Address: 3490 TOM'S COURT Name: NELSON, KIRBY W. Address: 3490 TOM'S COURT

City-St-Zip: GREEN COVE SPRINGS, FL 22043 US

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

 Name:
 NELSON, KERRY L
 Name:
 NELSON, KERRY L

 Address:
 3490 TOM'S COURT
 Address:
 3490 TOM'S COURT

City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

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

 Name:
 NELSON, KEVYN T.,
 Name:
 NELSON, KEVYN T

 Address:
 3490 TOM'S COURT
 Address:
 3490 TOM'S COURT

City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KIRBY W. NELSON P 04/25/2005