

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F84058

Entity Name: VANN DATA SERVICES, INC.

FILED
May 01, 2007
Secretary of State

Current Principal Place of Business:

1801 DUNN AVENUE
DAYTONA BEACH, FL 32114 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 10989
DAYTONA BEACH, FL 321201989 US

New Mailing Address:

FEI Number: 59-2231224

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VAN ARNAM, GEORGE
104 KEELY CIRCLE
NEW SMYRNA BEACH, FL 32168 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

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: DC () Delete
Name: VAN ARNAM, GEORGE M
Address: 104 KEELY CIRCLE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: DP () Delete
Name: HUFFSTICKER, JANICE,
Address: 38 BRYAN CAVE RD.
City-St-Zip: SOUTH DAYTONA, FL 32119

Title: DVP () Delete
Name: HUFFSTICKLER, J. T
Address: 38 BRYAN CAVE RD.
City-St-Zip: SOUTH DAYTONA, FL 32119

Title: DST () Delete
Name: VAN ARNAM, PATRICIA A
Address: 104 KEELY CIRCLE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

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:

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.

SIGNATURE: JANICE HUFFSTICKLER

DVP

05/01/2007

Electronic Signature of Signing Officer or Director

Date