

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F88730

FILED  
Apr 12, 2007  
Secretary of State

Entity Name: COMPUTER POWER SYSTEMS, INC.

## Current Principal Place of Business:

COMPUTER POWER SYSTEMS INC  
3421 S.R. 419  
WINTER SPRINGS, FL 32708 US

## New Principal Place of Business:

## Current Mailing Address:

COMPUTER POWER SYSTEMS INC  
P O BOX 150577  
ALTAMONTE SPRGS., FL 327150577 US

## New Mailing Address:

FEI Number: 59-2202439      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KUZMICK, KENNETH F.  
1001 BLACKWOOD STREET  
ALTAMONTE SPRINGS, FL 32701 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: CEO ( ) Delete  
Name: KUZMICK, KENNETH F.,  
Address: 1001 BLACKWOOD ST.  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: P ( ) Delete  
Name: KUZMICK, RICHARD  
Address: 711 MENDEZ WAY  
City-St-Zip: LONGWOOD, FL 32750

Title: V ( ) Delete  
Name: KUZMICK, JEFFREY  
Address: 1131 SHADOWBROOK TRAIL  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: ST ( ) Delete  
Name: KUZMICK, CHRISTINE  
Address: 711 MENDEZ WAY  
City-St-Zip: LONGWOOD, FL 32750

## 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 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: CHRISTINE KUZMICK

ST

04/12/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date