2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 29, 2005
Secretary of State

DOCUMENT# F97000004915

Entity Name: PICA GROUP SERVICES, INC.

Current Principal Place of Business:

110 WESTWOOD, SUITE 100
BRENTWOOD, TN 37027

New Principal Place of Business:

Current Mailing Address:

110 WESTWOOD, SUITE 100
BRENTWOOD, TN 37027

New Mailing Address:

FEI Number: 62-1668160 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE, FL 323990000 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: S ( ) Delete
Name: WILCZEK, ADAM P
Address: 1047 HOLLY TREE FARM RD
City-St-Zip: BRENTWOOD, TN 37027

Title: P ( ) Delete
Name: BROWN, AMBERRY
Address: 10229 BANBURY STATION
City-St-Zip: BRENTWOOD, TN 37027

Title: ATCF ( ) Delete
Name: WEBB, TERRY D
Address: 529 HOPE AVE
City-St-Zip: FRANKLIN, TN 37067

Title: V ( ) Delete
Name: WHITAKER, G SCOTT
Address: UDS FOUNTAIN BROOKE COURT
City-St-Zip: BRENTWOOD, TN 37027

Title: ACS ( ) Delete
Name: FOX, JANET C
Address: 118 HIGHLAND VILLA DR
City-St-Zip: NASHVILLE, TN 37211

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:

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 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: AMBERRY L. BROWN P 06/29/2005

Electronic Signature of Signing Officer or Director — Date