

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000005581

FILED  
Aug 26, 2005  
Secretary of State

**Entity Name:** TECHNOLOGY INTEGRATION FINANCIAL SERVICES, INC.

**Current Principal Place of Business:**

1020 PETERSBURG ROAD  
HEBRON, KY 41048

**New Principal Place of Business:**

**Current Mailing Address:**

1020 PETERSBURG ROAD  
HEBRON, KY 41048

**New Mailing Address:**

**FEI Number:** 61-1289490

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCKEOWN, LISA  
3740 ST. JOHN'S BLUFF RD. SOUTH  
#19  
JACKSONVILLE, FL 32224 US

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

CT CORPORATION SYSTEM  
1200 S PINE ISLAND RD  
PLANTATION, FL 33324 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:** CAROL RECORD

08/26/2005

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: CEO ( ) Delete  
Name: POMEROY, STEPHEN  
Address: 1020 PETERSBURG ROAD  
City-St-Zip: HEBRON, KY 41048

Title: D ( ) Delete  
Name: POMEROY, DAVID B.  
Address: 1020 PETERSBURG ROAD  
City-St-Zip: HEBRON, KY 41048

Title: ST ( ) Delete  
Name: ROHRKEMPER, MICHAEL R  
Address: 1020 PETERSBURG RD.  
City-St-Zip: HEBRON, KY 41048

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: CEO (X) Change ( ) Addition  
Name: POMEROY, STEPHEN E  
Address: 1020 PETERSBURG ROAD  
City-St-Zip: HEBRON, KY 41048

Title: D (X) Change ( ) Addition  
Name: POMEROY, STEPHEN E  
Address: 1020 PETERSBURG ROAD  
City-St-Zip: HEBRON, KY 41048

Title: STVP (X) Change ( ) Addition  
Name: ROHRKEMPER, MICHAEL R  
Address: 1020 PETERSBURG RD.  
City-St-Zip: HEBRON, KY 41048

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:** SANDY BROOKING, TAX SUPERVISOR

TAX

08/26/2005

Electronic Signature of Signing Officer or Director

Date