

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000002377

FILED
Mar 13, 2006
Secretary of State

Entity Name: CELLULAR SERVICES INC.

Current Principal Place of Business:

5555 N DAVI8S HWY.
UNIT G
PENSACOLA, FL 32503

New Principal Place of Business:

3329 GULF BREEZE PARKWAY
GULF BREEZE, FL 32563

Current Mailing Address:

5555 N DAVI8S HWY.
UNIT G
PENSACOLA, FL 32503

New Mailing Address:

3329 GULF BREEZE PARKWAY
GULF BREEZE, FL 32563

FEI Number: 54-1692256

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUPUIS, CHRIS
3014 PINE VALLEY ROAD
PACE, FL 32561 US

Name and Address of New Registered Agent:

DUPUIS, CHRIS
19 SUGAR BOWL LANE
PENSACOLA BEACH, FL 32561 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: CHRISTOPHER DUPUIS

03/13/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DUPUIS, CHRISTOPHER J
Address: 19 SUGAR BOWL LN
City-St-Zip: GULF BREEZE, FL 32561

Title: V () Delete
Name: DUPUIS, ANGELA
Address: 19 SUGAR BOWL LN
City-St-Zip: GULF BREEZE, FL 32561

Title: C () Delete
Name: DUPUIS, MICHAEL
Address: 7802FOUNDERS MILL WAY
City-St-Zip: GLOUCESTER, VA 23061

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:

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: CHRISTOPHER DUPUIS

P

03/13/2006

Electronic Signature of Signing Officer or Director

Date