

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Sep 27, 2004 8:00 am**  
**Secretary of State**

09-27-2004 90002 038 \*\*\*550.00

**DOCUMENT # F98000004346**

1. Entity Name  
FSS, INC.



Principal Place of Business  
565 ANDOVER PARK WEST, STE 201  
TUKWILA, WA 98188-3321

Mailing Address  
565 ANDOVER PARK WEST, STE 201  
TUKWILA, WA 98188-3321

14027412



2. Principal Place of Business

~~665 Andover Park W.~~  
7760 Technology Drive

Suite, Apt. #, etc.  
City & State West Melbourne, FL  
Tukwila, WA

Zip 33904  
Country U.S.A.

3. Mailing Address

~~665 Andover Park W.~~  
Tukwila, WA

Suite, Apt. #, etc.  
City & State  
Zip 98188-3321  
Country U.S.A.

09202004

Chg-P

CR2E034 (10/03)

4. FEI Number  
91-1919837

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00**  
**Due by September 8, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be**  
**Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE CEO ☒ Delete  
NAME MAY, TIMOTHY W  
STREET ADDRESS 565 ANDOVER PARK WEST STE 201  
CITY-ST-ZIP TUKWILA, WA 98188

TITLE CFO ☐ Delete  
NAME COOK, DONALD J  
STREET ADDRESS 565 ANDOVER PARK WEST, STE 201  
CITY-ST-ZIP TUKWILA, WA 98188

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE CEO ☐ Change ☒ Addition  
NAME Steve Kalman  
STREET ADDRESS 665 Andover Park W.  
CITY-ST-ZIP Tukwila WA 98188-3321

TITLE CFO ☒ Change ☐ Addition  
NAME Donald J. Cook  
STREET ADDRESS 665 Andover Park W.  
CITY-ST-ZIP Tukwila WA 98188-3321

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

9/21/04

205.575.9797