

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G64345

FILED
Jul 08, 2006
Secretary of State

Entity Name: COMMUNITY MANAGEMENT SERVICES, INC.

Current Principal Place of Business:

8056 OLD C.R. 54
NEW PORT RICHEY, FL 34653 US

New Principal Place of Business:

5609 US 19
SUITE E
NEW PORT RICHEY, FL 34652 US

Current Mailing Address:

8056 OLD C.R. 54
NEW PORT RICHEY, FL 34653 US

New Mailing Address:

5609 US 19
SUITE E
NEW PORT RICHEY, FL 34652 US

FEI Number: 59-2353283

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, KIM
8056 OLD C.R. 54
NEW PORT RICHEY, FL 34653 US

Name and Address of New Registered Agent:

JOHNSON, KIM
5609 US 19
SUITE E
NEW PORT RICHEY, FL 34652 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:

07/08/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JOHNSON, KIMBERLY
Address: 8056 OLD C.R 54
City-St-Zip: NEW PORT RICHEY, FL 34653 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: JOHNSON, KIMBERLY
Address: 5609 US 19 SUITE E
City-St-Zip: NEW PORT RICHEY, FL 34652 US

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: KIM JOHNSON

PRES

07/08/2006

Electronic Signature of Signing Officer or Director

Date