2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G67761

Entity Name: ENGINEERING DATA SERVICES, INC.

FILED Apr 30, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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740 FLORIDA CENTRAL PKWY 421 EAST STATE ROAD 434 STE. 1004 STE. #3

LONGWOOD, FL 32750 LONGWOOD, FL 32750

Current Mailing Address: New Mailing Address:

740 FLORIDA CENTRAL PKWY P. O. BOX 520193

STE. 1004 LONGWOOD, FL 32752 US LONGWOOD, FL 32750 US

FEI Number: 59-2910930 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LIAKOS, NANCY 353 BAHIA CIRCLE

LONGWOOD, FL 32750 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVP () Delete Title: (X) Change () Addition

WILSON, ROBERT L PFLUEGER, DONALD, Name: Name: 216 GARFIELD RD. 900 W. CHARING CROSS CIRCLE Address: Address:

City-St-Zip: ENTERPRISE, FL City-St-Zip: LAKE MARY, FL 32746

Title: D/P Title: (X) Change () Addition () Delete

Name: WALTERS, SUSAN. Name: WALTERS, SUSAN P

120 LEMON LANE 900 W. CHARING CROSS CIRCLE Address: Address:

LONGWOOD, FL 32750 LAKE AMRY, FL 32746 City-St-Zip: City-St-Zip:

Title: Title: D/S (X) Delete () Change () Addition

LIAKOS, NANCY, Name: Name: 353 BAHIA CIRCLE Address: Address: City-St-Zip: LONGWOOD, FL 32750 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: SUSAN WALTERS P/D 04/30/2004