


FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

03 DEC -9 AM 8:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # H42788	
1. Entity Name ADVANCED COPY SERVICES, INC	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 155-9 Blanding Blvd	3. Mailing Address 155-9 Blanding Blvd
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State Orange Park, FL	City & State Orange Park, FL
Zip 32073	Country

4. FEI Number 59-2501250	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE	7. Name and Address of Current Registered Agent	
	Name Ralph Harris	
	Street Address (P.O. Box Number is Not Acceptable)	
	155-9 Blanding Blvd	
	City Jacksonville	FL Zip Code 32073

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 Ralph Harris DATE 10/30/03

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD - RALPH HARRIS 4771 S ROSCOE Blvd EXT PONTE VEDRA BEACH, FL 32082	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD - GEORGE HOOD 11568 Gwynford LN JACKSONVILLE, FL 32223	TITLE NAME STREET ADDRESS CITY-ST-ZIP	600024387156 11/03/03--01093--002 **150.00
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: Ralph Harris DATE 10/30/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034B (12/02)

Advanced Copy Services, Inc

155-9 Blanding Blvd
Orange Park, FL 32073

October 24, 2003

Florida Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

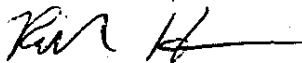
RE: ADVANCED COPY SERVICES, INC (FEI 59-2501250)

To Whom It May Concern:

The purpose of this letter is to request waiver of the \$600.00 Late Filing Fee charged by the Department of State. We never received the 2003 Uniform Business Report and would like to request an abatement of the Late Filing Fee. I am returning the Uniform Business Report for 2003 with a check for \$150.00.

If you have any questions, please feel free to call me at (904) 388-5700. Thank you for your consideration.

Sincerely,
ADVANCED COPY SERVICES, INC



Ralph Harris
President

Enclosure
