

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H92729

FILED
Jul 20, 2006
Secretary of State

Entity Name: ADVANCE TECHNOLOGY SUPPLY INC. OF ORLANDO

Current Principal Place of Business:

174 SEMORAN COMMERCE PL.
UNIT 120
APOPKA, FL 32703

New Principal Place of Business:

175 SEMORAN COMMERCE PL.
SUITE B
APOPKA, FL 32703

Current Mailing Address:

174 SEMORAN COMMERCE PL.
UNIT 120
APOPKA, FL 32703

New Mailing Address:

175 SEMORAN COMMERCE PL.
SUITE B
APOPKA, FL 32703

FEI Number: 59-2606308

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RYAN, WILLIAM D
435 BURNT TREE LN.
APOPKA, FL 32712 US

Name and Address of New Registered Agent:

RYAN, WILLIAM D PRES
435 BURNT TREE LN.
APOPKA, FL 32712 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: RYAN, WILLIAM, D.

07/20/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RYAN, WILLIAM,
Address: 435 BURNT TREE LN.
City-St-Zip: APOPKA, FL 32712

Title: V () Delete
Name: RYAN, SHEILA
Address: 435 BURNT TREE LN.
City-St-Zip: APOPKA, FL 32712

Title: VP () Delete
Name: COUTURE, GARY
Address: 641 OAK HOLLOW WAY
City-St-Zip: ALTAMONTE SPGS, FL

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: RYAN, WILLIAM

PRES

07/20/2006

Electronic Signature of Signing Officer or Director

Date