2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2005 08:00 AM
Secretary of State

DOCUMENT # J04093

1. Entity Name
SOURCE DATA SERVICES, INC.

Principal Place of Business	Mailing Address
18 SEA BREEZE DR CRAWFORDVILLE, FL 32327 US	18 SEA BREEZE DR CRAWFORDVILLE, FL 32327 US

01062005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2736112

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

FRIES, EDWARD, A.
18 SEA BREEZE DR
CRAWFORDVILLE, FL 32327

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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 the registered agent.

SIGNATURE: _____ DATE
(If changing Registered Agent, Registered Agent must sign)

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

	PD FRIES, EDWARD A. 18 SEA BREEZE DR CRAWFORDVILLE, FL 32327
	DV FRIES, NADINE V 18 SEA BREEZE DR CRAWFORDVILLE, FL 32327

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01/07/05-80038-018 150.00

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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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Edward A. Fries Edward A Fries 1/6/05 850-926-1379
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR