2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2006
Secretary of State

DOCUMENT# K56928

Entity Name: LONG'S SERVICES, INC.

Current Principal Place of Business:

1 AIR TERMINAL PKWY
MELBOURNE, FL 32901 US

New Principal Place of Business:

4057 S CHICKASAW TR
ORLANDO, FL 32829 US

Current Mailing Address:

LONG'S SERAVICES, INC
4057 S CHICKASAW TR
ORLANDO, FL 32829 US

New Mailing Address:

FEI Number: 59-2935512 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LONG, A.B.
4057 S CHICKASAW TR
ORLANDO, FL 32829 US

Name and Address of New Registered Agent:

LONG, HOWARD
4057 S CHICKASAW TR
ORLANDO, FL 32829 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: LONG, HOWARD 04/06/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete
Name: LONG, A.B.,
Address: 4057 S CHICKASAW TRAIL
City-St-Zip: ORLANDO, FL 32829

Title: DS ( ) Delete
Name: LONG, SHAFFIE B.,
Address: 4057 S CHICKASAW TRAIL
City-St-Zip: ORLANDO, FL 32829

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DV (X) Change ( ) Addition
Name: LONG, A.B.,
Address: 4057 S CHICKASAW TRAIL
City-St-Zip: ORLANDO, FL 32829

Title: DPT (X) Change ( ) Addition
Name: LONG, HOWARD,
Address: 4057 S CHICKASAW TRAIL
City-St-Zip: ORLANDO, FL 32829

Title: DS ( ) Change (X) Addition
Name: LONG, REBECCA,
Address: 4057 S CHICKASAW TRAIL
City-St-Zip: ORLANDO, FL 32829

Title: DTR ( ) Change (X) Addition
Name: SPIVEY, TIERRA,
Address: 4057 S CHICKASAW TRAIL
City-St-Zip: ORLANDO, FL 32829

Title: DTR ( ) Change (X) Addition
Name: LONG, ANTHONY 3RD,
Address: 4057 S CHICKASAW TRAIL
City-St-Zip: ORLANDO, FL 32829

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: LONG, HOWARD DPT 04/06/2006
Electronic Signature of Signing Officer or Director Date