

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L81435

FILED
Mar 03, 2004
Secretary of State

Entity Name: TOTAL MANAGEMENT SERVICES, INC.

Current Principal Place of Business:

971 BRIARCLIFF RD
TALLAHASSEE, FL 323086908

New Principal Place of Business:

92 ROYSTER DRIVE
CRAWFORDVILLE, FL 32327

Current Mailing Address:

971 BRIARCLIFF RD
TALLAHASSEE, FL 323086908

New Mailing Address:

92 ROYSTER DRIVE
CRAWFORDVILLE, FL 32327

FEI Number: 59-3066538

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONIGLIO, MICHAEL J
971 BRIARCLIFF RD
TALLAHASSEE, FL 323086908 US

Name and Address of New Registered Agent:

CONIGLIO, MICHAEL J
92 ROYSTER DRIVE
CRAWFORDVILLE, FL 32327 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:

03/03/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CONIGLIO, MICHAEL J
Address: 971 BRIARCLIFF RD
City-St-Zip: TALLAHASSEE, FL 323086908

Title: EVPD () Delete
Name: CONIGLIO, MARY JANE
Address: 971 BRIARCLIFF RD
City-St-Zip: TALLAHASSEE, FL 323086908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CONIGLIO, MICHAEL J
Address: 92 ROYSTER DRIVE
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: EVPD (X) Change () Addition
Name: CONIGLIO, MARY JANE
Address: 92 ROYSTER DRIVE
City-St-Zip: CRAWFORDVILLE, FL 32327

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: MICHAEL J. CONIGLIO

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03/03/2004

Electronic Signature of Signing Officer or Director

Date