

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 17, 2008 8:00 am
Secretary of State

06-17-2008 90001 028 ***150.00

DOCUMENT # L82439 1. Entity Name CENTRAL SERVICES GROUP, INC.					
Principal Place of Business 2770 NW 43RD ST STE N GAINESVILLE, FL 32606 US			Mailing Address 2770 NW 43RD ST STE N GAINESVILLE, FL 32606 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State Zip Country			City & State Zip Country		
4. FEI Number 59-3046375			Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent NELSON, JOHN R. 2770 NW 43RD ST STE N GAINESVILLE, FL 32606			7. Name and Address of New Registered Agent Name JOHN N. NELSON Street Address (P.O. Box Number is Not Acceptable) 20729 NE 6TH ST. City GAINESVILLE FL Zip Code 32609		
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 <small>Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reappointing)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSD NELSON, JOHN R. 5813 N.W. 72ND ST GAINESVILLE, FL 32653	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D NELSON, JOHN N 20729 NE 6TH STREET GAINESVILLE, FL 32609	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
Date 6/17/08 Daytime Phone # 3525054145					

CLIENT'S COPY

CSG

Professional Telecommunications

ATTACHMENT

40108473

L82439

June 13, 2008

Division of Corporations
ATTN: Karen Saly
POBOX 6327
Tallahassee, FL 32314

Reference: 000000178784

To Whom It May Concern:

Our Accountant submitted the 2008 for Profit Corporation Annual Report on April 7th via U.S. Postal Delivery. Our office then requested our payment the same day, but in a separate envelope directly from our Bank.

We did not receive a returned Annual report, but we recently received a returned check for the payment.

After speaking with you, you requested we mail everything back to your attention.

Please accept this copy of the original annual report along with Payment. Please call us if you have any questions or concerns.

Thank you,



Michelle L. Finnen

Central Services Group, Inc.

2770 NW 43rd Street ~ Suite N ~ Gainesville, FL 32606 ~ (352) 338-3535 ~ fax: (352) 367-0792