

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000001877

**FILED**  
**Mar 05, 2004**  
**Secretary of State****Entity Name:** CAPITAL SUPPORT SERVICES, INC.**Current Principal Place of Business:**2013 ATAPHA NENE  
TALLAHASSEE, FL 32301**New Principal Place of Business:**831 MCGUIRE AVENUE  
TALLAHASSEE, FL 32303 US**Current Mailing Address:**2013 ATAPHA NENE  
TALLAHASSEE, FL 32301**New Mailing Address:**831 MCGUIRE AVENUE  
TALLAHASSEE, FL 32303 US**FEI Number:** 50-0001247**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**LITTLE, CHRISTOPHER B  
2013 ATAPHA NENE  
TALLAHASSEE, FL 32301**Name and Address of New Registered Agent:**LITTLE, CHRISTOPHER B  
831 MCGUIRE AVENUE  
TALLAHASSEE, FL 32303 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:

03/05/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: LITTLE, CHRISTOPHER B  
Address: 2013 ATAPHA NENE  
City-St-Zip: TALLAHASSEE, FL 32301

Title: CD ( ) Delete  
Name: TODD, JULIE  
Address: 405 MCKEITHEN STREET  
City-St-Zip: TALLAHASSEE, FL 32304

Title: DD ( ) Delete  
Name: SYGRET, SHANE  
Address: 3914 TRALEE RD.  
City-St-Zip: TALLAHASSEE, FL 32309

Title: TD ( ) Delete  
Name: LITTLE, PAUL D  
Address: 6003 NW 36TH PLACE  
City-St-Zip: GAINESVILLE, FL 32606

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: LITTLE, CHRISTOPHER B  
Address: 831 MCGUIRE AVENUE  
City-St-Zip: TALLAHASSEE, FL 32303

Title: C (X) Change ( ) Addition  
Name: TODD, JULIE  
Address: 405 MCKEITHEN STREET  
City-St-Zip: TALLAHASSEE, FL 32304

Title: D (X) Change ( ) Addition  
Name: SYFRET, SHANE  
Address: 3914 TRALEE RD.  
City-St-Zip: TALLAHASSEE, FL 32309

Title: T (X) Change ( ) Addition  
Name: LITTLE, PAUL D  
Address: 6003 NW 36TH PLACE  
City-St-Zip: GAINESVILLE, FL 32606

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTOPHER B. LITTLE

P

03/05/2004

Electronic Signature of Signing Officer or Director

Date