


**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 05, 2005 08:00 AM
Secretary of State

DOCUMENT # N03000008806 1. Entity Name FIRST SERVE, INC.	
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Principal Place of Business 401 EAST LAS OLAS BLVD. SUITE 1400 FT. LAUDERDALE, FL 33301 US	Mailing Address 401 EAST LAS OLAS BLVD. SUITE 1400 FT. LAUDERDALE, FL 33301 US
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07302005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 05-0588900	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent BUCHHOLZ, EARL H III 401 EAST LAS OLAS BLVD. SUITE 1400 FT. LAUDERDALE, FL 33301
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**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

**Filing Fee is \$61.25
Due by September 7, 2005**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DPT BUCHHOLZ, EARL H III 1113 SE 8TH ST. FT. LAUDERDALE, FL 33316
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS BUCHHOLZ, EARL H JR. 4725 DAVIS ROAD MIAMI, FL 33143
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D STRICKLAND, J. WILLIAM 350 EAST ST. JOHN STREET SPARTANBURG, SC 29302
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

1000000875625
08/05/05-800003-013 61.25

**DO NOT WRITE
IN THIS SPACE**

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 617, 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:  **EARL 'TREV' BUECHHOLZ** **8/1/05**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #