


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2005 08:00 AM
Secretary of State

DOCUMENT # P00000054320	
1. Entity Name L.S.S. CONSULTING, INC.	

Principal Place of Business 1114 S. DEERFIELD AVENUE DEERFIELD, FL 33441	Mailing Address 4057 PIONEER DRIVE SUITE # 200 WALLED LAKE, MI 48390
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01122005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 38-3056260	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent FLYNN, PATRICK T 1114 S. DEERFIELD AVENUE DEERFIELD, FL 33441
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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 <u>Patrick T. Flynn</u> <u>Patrick T. Flynn</u> (No change)	DATE <u>1/12/05</u>

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FLYNN, PATRICK T 1114 S. DEERFIELD AVENUE DEERFIELD, FL 33441
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01/19/05-80077-019 150.00

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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 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: <u>Ned Timmons</u> <u>NED TIMMONS</u>	DATE <u>1/12/05</u> DAYTIME PHONE # <u>248-366-5020</u>