2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000108171

Entity Name: SYSTEM TECH SERVICES, INC.

FILED Feb 15, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
164 HIBISCUS ROAD	401 S SR 434

164 HIBISCUS ROAD 401 S. SR 434 EDGEWATER, FL 32141 SUITE #1050

ALTAMONTE SPRINGS, FL 32714

Current Mailing Address: New Mailing Address:

164 HIBISCUS ROAD 557 CARO COURT

EDGEWATER, FL 32141 NEW SMYRNA BEACH, FL 32168

FEI Number: 59-3681183 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TOWE, ROBERT L 401 S.S.R. 434, SUITE 1050 ALTAMONTE SPRINGS, FL 32714 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: TOWE, ROBERT L Name: TOWE, ROBERT L Address: 164 HIBISCUS ROAD Total Address: 557 CARO COURT

City-St-Zip: EDGEWATER, FL 32141 City-St-Zip: NEW SMYRNA, FL 32168

Title: T () Delete Title: T (X) Change () Addition Name: TOWE, KIM-ANNE Name: TOWE, KIM-ANNE

Address: 164 HIBISCUS ROAD Address: 557 CARO COURT

City-St-Zip: EDGEWATER, FL 32141 City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: V () Delete Title: () Change () Addition

 Name:
 LAWRENSON, DAYMON
 Name:

 Address:
 2450 WASSUM TRL.
 Address:

 City-St-Zip:
 CHULUOTA, FL 32766
 City-St-Zip:

Title: S () Delete Title: S (X) Change () Addition

 Name:
 TOWE, KIM-ANNE
 Name:
 TOWE, KIM-ANNE

 Address:
 164 HIBISCUS ROAD
 Address:
 557 CARO COURT

City-St-Zip: EDGEWATER, FL 32141 City-St-Zip: NEW SMYRNA BEACH, FL 32168

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: KIM-ANNE TOWE T 02/15/2006