2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P00000113565

CONTRACT SERVICES ORGANIZATION, INC.



Principal Place of Business

127 MIRACLE STRIP PKWY

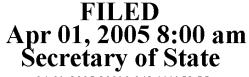
FT. WALTON BEACH, FL 32548

Mailing Address

127 MIRACLE STRIP PKWY

DO NOT WRITE IN THIS SPACE

FT. WALTON BEACH, FL 32548



04-01-2005 90010 048 ***158.75



03182005

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-3673128

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MEAD, MICHAEL W PA 24 WALTER MARTIN RD : 4 STE 3

FT. WALTON BEACH, FL 32548

of the corporation or the receive

SIGNATURE

DO NOT WRITE IN THIS SPACE

the obligat	ions of registered agent.,	urpose of changing its register	red affice or re	egistered agent, or bo	th, in the State of Fiorida. I am familiar with, and accept
SIGNATURE_	Signature typed or printed name of negratored agent and title if	epprinable. (NOTE: Registero	od Agent signaltire	(grifstaneo neitw heruger	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.				\$5.00 May Be Added to Fees	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
10.	OFFICERS AND DIREC	TORS			
THLE NAME STREET AOURESS CITY-ST-ZIP	P BROOKS, GENE 127 MIRACLE STRIP PKWY STE N7 FORT WALTON BEACH, FL 32548				
TITLE NAME Striet audiress City-St-Zip	-8V SVP FOSTER BROOKS, JANICE 127 MIRACLE STRIP PKWY STE N7 FORT WALTON BEACH, FL 32548				
TITLE NAME SINEET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY+ST+ZIP				IN .	THIS SPACE
TITLE NAME SINEEY ADDRESS CITY-SI-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
indicated	on this report or eappiemental report is true a	nd accurate and that my signa	ature shall hav	e the same legal effect	(i), Florida Statutes. I further certify that the information at as if made under oath; that I am an officer or director as; and that my name appears in Block 10 or Block 11 if