

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P01000037880

Entity Name: BUSINESS SUPPORT, INC.

FILED
Sep 23, 2005
Secretary of State

Current Principal Place of Business:

417 STOWE AVE, SUITE 2
ORANGE PARK, FL 32073

New Principal Place of Business:

417 STOWE AVE, SUITE 2
SUITE 2
ORANGE PARK, FL 32073

Current Mailing Address:

417 STOWE AVE, SUITE 2
ORANGE PARK, FL 32073

New Mailing Address:

417 STOWE AVE
SUITE 2
ORANGE PARK, FL 32073

FEI Number: 59-3713813

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COGAN, ROBERT J
1621 RIVER BREEZE DR
ORANGE PARK, FL 32003 US

Name and Address of New Registered Agent:

COGAN, LISA B
417 STOWE AVE
SUITE 2
ORANGE PARK, FL 32073 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: LISA B. COGAN

09/23/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: COGAN, ROBERT J
Address: 1621 RIVER BREEZE DRIVE
City-St-Zip: ORANGE PARK, FL 32003 US

Title: VSD (X) Delete
Name: COGAN, LISA B
Address: 1621 RIVER BREEZE DRIVE
City-St-Zip: ORANGE PARK, FL 32003 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: COGAN, LISA B
Address: 417 STOWE AVE SUITE 2
City-St-Zip: ORANGE PARK, FL 32073 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

SIGNATURE: LISA B COGAN

D

09/23/2005

Electronic Signature of Signing Officer or Director

Date