## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jul 26, 2004 8:00 am Secretary of State

DOCUMENT # P01000039885  1. Entity Name TANNER SERVICES, INC.								07-26-2004 90012 007 ***150.00				
Principal Place of Business 604 W. PARKER ST. LAKELAND, FL 33803				Mailing Address 604 W. PARKER ST. LAKELAND, FL 33803				) ( <b>188418</b> ) (P.	4050044	-    <b>                                    </b>	<b>8</b> 1 18181 (818) 8)/	(88) (1 183)
2. Principal Place of Business  1/33 DEWTON ST.  Suite, Apt. #, etc.				3. Mailing Address  / 13.3 DEWTON ST, Suite, Apt. #, etc.								
City & State	· 			City & State				<b>07202004 4.</b> FEI Numbe	Chg-P	CR2E0	34 (10/03)	plied For
LAKELAND FL			LA	LAKELAND, FL				59-371			No	t Applicable
Zip Country 33 803 4 SA				Zip Count 33363				5. Certificate of Status Desired S8.75 Additional Fee Required  7. Name and Address of New Registered Agent				
6. Name and Address of Current Registered Agent								7. Name and	Address of New R	egistered A	igent	
TANNER, ROBERT H II 604 W. PARKER:ST. LAKELAND, FL 33803						Street Address (P.O. Box Number is Not Acceptable)  //3.3 PENTON ST.						
·/					City			かいひ		FL	Zip Code	 303
8. The above named entity's utrinits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Lam familiar with, and accept the obligations of registered agent.  SIGNATURE  Signature fixed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  COATE												and accept
FILE NOWE FEE IS \$150.00  Due by September 8, 2004  9. Election Campaign Fina Trust Fund Contribution.						ncing		00 May Be ed to Fees	In accordance v corporation did	with s. 607. not receive	.193(2)(b), le the prior n	F.S., the notice.
10.	D	OFFICERS AND	DIRECT					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TANNER, 604 W. P.	ROBERT H II ARKER ST ND, FL 33803		□ Delete				BENTON ELAND	i ST. FL 33803	<u>.</u>	Change	Addition
TITLE NAME STREET ADDRESS				☐ Delete	TITU. NAM					ALLES ANTENNA DE LA CONTRACTOR DE LA CON	Change	☐ Addition
CITY-ST-ZIP						'-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	.,			Delate	STRE	E NE		-		. ~	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	B						Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				□ Delete							Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	-		VITALITY POPULATION AND AND AND AND AND AND AND AND AND AN	☐ Delete						-	Change .	Addition
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 by 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 add est, with all other like empowered.												