


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 20, 2005 08:00 AM
Secretary of State

DOCUMENT # P01000083239 1. Entity Name DATA CONVERSION RESOURCE, INC.		
Principal Place of Business 16951 NE 4TH ST SILVER SPRINGS, FL 34488	Mailing Address 16951 NE 4TH ST SILVER SPRINGS, FL 34488	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent SVEE, JOHN D 16951 NE 4TH ST SILVER SPRINGS, FL 34488		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: _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing)</small> DATE: _____		
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D GROETZ, JOHN D 141 LOCH-LEVEN DR LAKE GEORGE, CO 80827	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D GROETZ, MARY A 141 LOCH-LEVEN DR LAKE GEORGE, CO 80827	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D SVEE, JOHN D 16951 NE 4TH ST SILVER SPRINGS, FL 34488	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		
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TITLE NAME STREET ADDRESS CITY-STATE-ZIP		
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><i>John D. Sree</i></u> July 12, 2005 352-625-5414 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>		



07122005 No Chg-P CR2E034 (10/03)

4. FEI Number
84-1383485

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

000000373513
07/20/05-80003-002 150.00

**DO NOT WRITE
IN THIS SPACE**