2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000088547

MORROW, JEANNE H

ASTOR, FL 32102 US

1820 ORMANDS JUNGLE DEN RD, LOT 96

Name:

Address: City-St-Zip:

Entity Name: TOTAL PROPERTY SOLUTIONS INC.

FILED May 01, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1820 ORMANDS JUNGLE DEN RD LOT 96 ASTOR, FL 32102 **New Mailing Address: Current Mailing Address:** PO BOX 659 ASTOR, FL 32102 US FEI Number: 65-1151347 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: MORROW, JEANNE H 1820 ORMANDS JUNGLE DEN RD LOT 96 ASTOR, FL 32102 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 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition MORROW, CHARLES B Name: Name: 1820 ORMANDS JUNGLE DEN RD, LOT 96 Address: Address: City-St-Zip: ASTOR, FL 32102 US City-St-Zip: Title: VPD (X) Delete Title: () Change () Addition Name: MORROW, TRACEY M Name: 18196 ACKERMAN AVE. Address: Address: PORT CHARLOTTE, FL 33953 US City-St-Zip: City-St-Zip: Title: Title: STD () Delete () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JEANNE H. MORROW STD 05/01/2006