

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000113781

FILED  
Apr 24, 2002 8:00 AM  
Secretary of State

Entity Name: CARNES TECHNICAL SOLUTIONS INC.

## Current Principal Place of Business:

308 VALLEY DRIVE  
LONGWOOD, FL 32779

## New Principal Place of Business:

308 VALLEY DRIVE  
LONGWOOD, FL 32779 US

## Current Mailing Address:

308 VALLEY DRIVE  
LONGWOOD, FL 32779

## New Mailing Address:

308 VALLEY DRIVE  
LONGWOOD, FL 32779 US

FEI Number: 59-3759243

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CARNES, DAVID A  
308 VALLEY DRIVE  
LONGWOOD, FL 32779

## Name and Address of New Registered Agent:

CARNES, DAVID A  
308 VALLEY DRIVE  
LONGWOOD, FL 32779 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: DAVID A. CARNES

04/24/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: CARNES, DAVID A  
Address: 308 VALLEY DRIVE  
City-St-Zip: LONGWOOD, FL 32779

Title: V ( ) Delete  
Name: CARNES, CATHERINE R  
Address: 308 VALLEY DRIVE  
City-St-Zip: LONGWOOD, FL 32779

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: DAVID CARNES

P

04/24/2002

Electronic Signature of Signing Officer or Director

Date