2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 21, 2006 08:00 AM
Secretary of State

DOCUMENT # P02000003969

1. Entity Name
SPECTRUM BUSINESS SERVICES, INC.

Principal Place of Business	Mailing Address
8808 VENTURE COVE # 103 TAMPA, FL 33637	8808 VENTURE COVE # 103 TAMPA, FL 33637

.DO NOT WRITE IN THIS SPACE

08112006 No Chg-P CR2E034 (11/05)

4. FEI Number
90-0007375
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MARLOWE & MCNABB, P.A.
324 S. HYDE PARK AVE., SUITE 210
TAMPA, FL 33606

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$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	D
NAME	RICKMAN, LANE D
STREET ADDRESS	8812 VENTURE COVE
CITY-ST-ZIP	TAMPA, FL 33637
TITLE	D
NAME	RICKMAN, LEONARD L
STREET ADDRESS	8812 VENTURE COVE
CITY-ST-ZIP	TAMPA, FL 33637
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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08/21/06-80002-006 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Lane D. Rickman 8/15/06
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL Date Daytime Phone #