

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000024750

Entity Name: LEGAL-TECH SOLUTIONS, INC.

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

2210 ARIELLE DRIVE, #1109
NAPLES, FL 34109

New Principal Place of Business:

5285 WHITTEN DRIVE
NAPLES, FL 34104

Current Mailing Address:

2430 VANDERBILT BEACH ROAD
#108-307
NAPLES, FL 34109

New Mailing Address:

5285 WHITTEN DRIVE
NAPLES, FL 34104

FEI Number: 30-0064004

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLEMAN, J. MICHAEL ESQ.
2640 GOLDEN GATE PARKWAY
SUITE 115
NAPLES, FL 34105 US

Name and Address of New Registered Agent:

COLEMAN, J. MICHAEL ESQ.
2640 GOLDEN GATE PARKWAY
SUITE 304
NAPLES, FL 34105 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:

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MELFA, CINDY A
Address: 2210 ARIELLE DRIVE, #1109
City-St-Zip: NAPLES, FL 34109

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MELFA, CINDY A
Address: 5285 WHITTEN DRIVE
City-St-Zip: NAPLES, FL 34104

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: CINDY A. MELFA

P

04/29/2005

Electronic Signature of Signing Officer or Director

Date