2006 FOR PROFIT CORPORATION

AMENDED ANNUAL REPORT							21L	t.			
DOCUMENT # P02000052450							ARY Signature	i Ji illi Roqea	ATIO		
1. Entity Name						•	,blonier 9	.111 321			
HI-TECH SYSTEM ASSOCIATES, INC.						()6 HAY 11	AH 8	: 45		
				600 M							
Principal Place of Business Mailing Address					ŀ						
6820 MILLHOPPER RD 6820 MILLHOPPER RD GAINESVILLE, FL 32653 GAINESVILLE, FL 32653											
							III AFDA BENI BOM DEN			IBSI ISB	
Principal Place of Business 3. Mailing Address											
	Crescent Drive	2912-1 Crescent Drive				68 38	ILIN 1484 NAIII NAI4 NAIL	i maiëi AhfA ii			
Suite, Apt.	₩, ΘIG.	Suite, Apt. #, etc.				05022006	Chg-P	CR2E0	34 (11/05)		
City & State	8	City & State				4. FEI Number			Ap	plied For	
Tallahas ^{Zip}	ahassee, Florida Tallahassee, Country Zip					04-3667	853			t Applicable	
32301	Country	Country Zip Cour			i	5. Certificate of	Status Desired		\$8.75 Add Fee Required		
6. Name and Address of Current Registered Agent						7. Name and A	ddress of New R	egistered .			
					Name Jason Wester						
CHRISTMAS, JOHN H JR 6820 MILLHOPPER RD					Street Address (P.O. Box Number is Not Acceptable)						
GAINESVILLE, FL 32653					2912	2-1 Cresc	ent Drive				
				City					Zip Code		
						hassee		FL	Zip Code 3230		
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 Jason Wester, President on Us 5-4-06											
SIGNATURE JASON WESTER, President Signature, typed or printed name of registered agent and title if applicable. MOPE: Registered Agent signature required when reinstating) DATE											
9. Election Campaign Financing \$5.00 May Re											
Am	ended AR is \$61.25	Trust Fund Cont	-	icing		00 May Be ed to Fees					
10.	OFFICERS AND	L DIRECTORS	11.			ADDITIONS/C	HANGES TO OFFI	CERS AND	DIRECTORS	S IN 11	
TITLE	PTD	Delete	TITLE	: ;	P/CEC		•			☐ Addition	
NAME STREET ADDRESS	CHRISTMAS, JOHN H JR 6820 MILLHOPPER RD		NAM			n Wester					
CITY-ST-ZIP	GAINESVILLE, FL 32653			ET ADDRESS - ST- ZIP	2912 Tali	2-1 Cresc Lahassee.	ent Drive Florida	32301			
TITLE	VSD	□ Delete	TITLE		D				X Change	☐ Addition	
NAME	CHRISTMAS, GRACE		NAM	E	John	H. Chri	stmas, Jr	•	_ ,		
STREET ADDRESS CITY-ST-ZIP	6820 MILLHOPPER RD			ET ADDRESS - ST- ZIP	6820 Gair) Millhop nesville.	per Road Florida	32653			
TITLE	GAINESVILLE, FL 32653	 ☑ Delete	TITLE						Change	Addition	
NAME	CHRISTMAS, JOHN H III	LOI Delete	NAM						☐ mange	☐ Addition	
STREET ADDRESS	3857 SW 1ST AVENUE			ET ADDRESS		40	00751 0601003		584		
CITY-ST-ZIP	GAINESVILLE, FL 32607		-	-ST-ZIP		05/24/	<u> 86~-01003</u>	016		• •	
TITLE NAME		☐ Delete	TITLE						☐ Change	☐ Addition	
STREET ADDRESS				ET ADDRESS							
CITY-ST-ZIP			CITY	-ST-ZIP							
TITLE		☐ Delete	TITLE						Change	☐ Addition	
NAME Street address			NAM STRE	E ET ADDRESS							
CITY-ST-ZIP				-ST-ZIP							
TITLE		☐ Delete	TITLE					·	☐ Change	☐ Addition	
NAME CORET ADODESC	-		NAM	-							
STREET ADORESS CITY-ST-ZIP				ET ADDRESS - ST- ZIP							
12. I hereby o	 certify that the information supplied with	this filing does not qualify for	or the exe	emptions c	I ontained	in Chapter 119.	Florida Statutes. I	further cer	tify that the in	nformation	
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: Jason Wester President (850) 658-7649											
SIGNATURE: Jason Wester, President						5	-7-06	850)_	658-764	49	
J. J. 1771		PRINTED NAME OF SIGNING OFFICER	OR DIRECT	TOR	4/11/		Date		Davtime Phone #		