

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000057929

FILED
Apr 04, 2005
Secretary of State

Entity Name: POLLUTION CONTROL SERVICES, INC.

Current Principal Place of Business:

4035 GUINEVERE DRIVE
PENSACOLA, FL 32514

New Principal Place of Business:

Current Mailing Address:

4035 GUINEVERE DRIVE
PENSACOLA, FL 32514

New Mailing Address:

6847-A NORTH NINTH AVE
#192
PENSACOLA, FL 32504

FEI Number: 01-0700468

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEANZA, PAUL
4035 GUINEVERE DRIVE
PENSACOLA, FL 32514 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LEANZA, PAUL
Address: 4035 GUINEVERE DRIVE
City-St-Zip: PENSACOLA, FL 32514

Title: D () Delete
Name: CARLETON, GREGORY R
Address: 1231 PARASOL PLACE
City-St-Zip: PENSACOLA, FL 32507

Title: D () Delete
Name: CARLETON, BRADFORD R
Address: 7669 CHARTER OAKS DR.
City-St-Zip: PENSACOLA, FL 32514

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: D () Change (X) Addition
Name: HAMMOND, JON C
Address: 1460 CACAO LANE
City-St-Zip: PENSACOLA, FL 32507

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: PAUL LEANZA

D

04/04/2005

Electronic Signature of Signing Officer or Director

Date