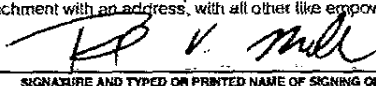


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2004 08:00 AM
Secretary of State

DOCUMENT # P02000133006		
1. Entity Name PREMIER SERVICE CORPORATION		
Principal Place of Business 5830 142ND AVE NORTH CLEARWATER, FL 33760	Mailing Address 5830 142ND AVE NORTH CLEARWATER, FL 33760	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent YADLEY, GREGORY C ESQ SHUMAKER, LOOP & KENDRICK, LLP 101 E KENNEDY BLVD STE 2800 TAMPA, FL 33602		DO NOT WRITE IN THIS SPACE
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reissuing)		
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		U000000145005 05/03/04-80006-015 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC ERNSTEEN, JOSEPH E 1645 PORTAGE PASS DEERFIELD, IL 60015	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KUCI, RICHARD A 1451 NW 62ND STREET DEERFIELD, IL 60015	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCMURTREY, T. BRAD 350 EAST BAY DRIVE LARGO, FL 33770	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MELLINI, PAUL V 5830 142ND AVE NORTH CLEARWATER, FL 33760	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D O'NEIL, BRENDA M 4959 S. CLEVELAND AVE. FORT MYERS, FL 33907	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KUHLMAN, JIM 160 POINTE LOOP DRIVE VENICE, FL 34293	
12. I hereby certify that the information supplied with this filing does not qualify 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 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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Paul V. Mellini		4-29-04 Date 727-373-1902 Daytime Phone #