

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000004500

FILED
Mar 10, 2005
Secretary of State

Entity Name: TACTICAL TRAINING SOLUTIONS, INC.

Current Principal Place of Business:

PO BOX 291514
PORT ORANGE, FL 321291514

New Principal Place of Business:

624 BOARS HEAD DR.
PORT ORANGE, FL 32127

Current Mailing Address:

PO BOX 291514
PORT ORANGE, FL 321291514

New Mailing Address:

PO BOX 291848
PORT ORANGE, FL 321291848

FEI Number: 02-0668927

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARNACK, DEBORAH J
4343 RIDGEWOOD AVE SUITE A
PORT ORANGE, FL 32127 US

Name and Address of New Registered Agent:

BARNACK, BART A MR
624 BOARS HEAD DR.
PORT ORANGE, FL 32127 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: BART BARNACK

03/10/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BARNACK, DEBORAH J
Address: PO BOX 291514
City-St-Zip: PORT ORANGE, FL 321291514

Title: D () Delete
Name: BARNACK, BART A
Address: PO BOX 291514
City-St-Zip: PORT ORANGE, FL 321291514

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BARNACK, BART A
Address: PO BOX 291848
City-St-Zip: PORT ORANGE, FL 321291848

Title: D (X) Change () Addition
Name: BARNACK, BART A
Address: PO BOX 291848
City-St-Zip: PORT ORANGE, FL 321291848

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: BART BARNACK

D

03/10/2005

Electronic Signature of Signing Officer or Director

Date