2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000022469

Entity Name: FOR SERVICE, INC.

FILED May 25, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6401 ROBERTA DRIVE ENGLEWOOD, FL 34224

Current Mailing Address: New Mailing Address:

6401 ROBERTA DRIVE PO BOX 594

ENGLEWOOD, FL 34224 ENGLEWOOD, FL 34295

FEI Number: 11-3678542 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SPEARS, RHONDA CLARK, BRET

6401 ROBERTA DRIVE 121 N MCCALL ROAD

US US ENGLEWOOD, FL 34224 ENGLEWOOD, FL 34223

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: BRET CLARK 05/25/2006

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: **VPTD** (X) Change () Addition

SPEARS, GLEN Name: Name: SPEARS, GLEN 6401 ROBERTA DR. PO BOX 594 Address: Address:

City-St-Zip: ENGLEWOOD, FL 34224 City-St-Zip: ENGLEWOOD, FL 34295

Title: PSD Title: () Delete (X) Change () Addition

Name: ANDERSON, GREGORY S Name: ANDERSON, GREGORY S

6425 ROBERTA DR. PO BOX 594 Address: Address: ENGLEWOOD, FL 34224 ENGLEWOOD, FL 34295 City-St-Zip: City-St-Zip:

Title: (X) Change () Addition Title: D

() Delete SPEARS, RHONDA G SPEARS, RHONDA G Name: Name:

6401 ROBERTA DR. PO BOX 594 Address: Address:

City-St-Zip: ENGLEWOOD, FL 34224 City-St-Zip: ENGLEWOOD, FL 34295

Title: () Delete Title: (X) Change () Addition

JANIK-ANDERSON, LAURA JANIK, LAURA Name: Name: Address: 6425 ROBERTA DR. Address: PO BOX 594

City-St-Zip: ENGLEWOOD, FL 34224 City-St-Zip: ENGLEWOOD, FL 34295

Title: Title: () Delete (X) Change () Addition

SPEARS, GLEN Name: Name: DANIEL, SCHOTT 6401 ROBERTA DR. Address: PO BOX 594 Address:

City-St-Zip: ENGLEWOOD, FL 34224 City-St-Zip: ENGLEWOOD, FL 34295

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

Ρ SIGNATURE: GREGORY S ANDERSON 05/25/2006