

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000028430

FILED  
Feb 21, 2006  
Secretary of State

Entity Name: TECHNOLOGY SUPPLY, INC.

**Current Principal Place of Business:**

12590 METRO PARKWAY, SUITE 1  
FORT MYERS, FL 33912

**New Principal Place of Business:**

**Current Mailing Address:**

12590 METRO PARKWAY, SUITE 1  
FORT MYERS, FL 33912

**New Mailing Address:**

1010 HALEY ROAD  
MURFREESBORO, TN 37129

FEI Number: 05-0557989

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: ARPASI, RUSS  
Address: 12590 METRO PARKWAY, SUITE 1  
City-St-Zip: FORT MYERS, FL 33912

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

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

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: CFO (X) Change ( ) Addition  
Name: TOLLETT, KIMBERLY  
Address: 1010 HALEY ROAD  
City-St-Zip: MURFREESBORO, TN 37129

Title: CEO ( ) Change (X) Addition  
Name: YOUNG, FRED  
Address: 1000 PARK DRIVE  
City-St-Zip: LAWRENCE, PA 15055

Title: TRES ( ) Change (X) Addition  
Name: MCANDREW, MICHAEL  
Address: 1000 PARK DRIVE  
City-St-Zip: LAWRENCE, PA 15055

Title: PRES ( ) Change (X) Addition  
Name: WILLIAMS, GARY  
Address: 1010 HALEY ROAD  
City-St-Zip: MURFREESBORO, TN 37129

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.

SIGNATURE: KIMBERLY TOLLETT

CFO

02/21/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date