

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000042073

FILED
May 14, 2007
Secretary of State

Entity Name: EXPRESS PROCESSING & SUPPORT SERVICES, INC.

Current Principal Place of Business:

701 N. HERCULES AVE.
SUITE D
CLEARWATER, FL 33765

New Principal Place of Business:

509 VIRGINIA LN.
CLEARWATER, FL 33764

Current Mailing Address:

701 N. HERCULES AVE
SUITE D
CLEARWATER, FL 33765

New Mailing Address:

509 VIRGINIA LN.
CLEARWATER, FL 33764

FEI Number: 56-2342791

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BYRNES, TRACY
701 N. HERCULES AVE
CLEARWATER, FL 33765 US

Name and Address of New Registered Agent:

BYRNES, TRACY
509 VIRGINIA LN.
CLEARWATER, FL 33764 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:

05/14/2007

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:

Title: P () Delete
Name: BYRNES, TRACY
Address: 701 N. HERCULES AVE SUITE D
City-St-Zip: CLEARWATER, FL 33765

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BYRNES, TRACY
Address: 509 VIRGINIA LN.
City-St-Zip: CLEARWATER, FL 33764

Title: V () Change (X) Addition
Name: BYRNES, THOMAS L
Address: 509 VIRGINIA LN.
City-St-Zip: CLEARWATER, FL 33764

I hereby certify that the information supplied with this filing does not qualify 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: THOMAS BYRNES

V

05/14/2007

Electronic Signature of Signing Officer or Director

Date