

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000094749

**FILED**  
**Jan 11, 2005**  
**Secretary of State**

**Entity Name:** EOM CONSULTING SERVICE, INC.

**Current Principal Place of Business:**

3565 COPPER RD  
JACKSONVILLE, FL 32218

**New Principal Place of Business:**

9378 ARLINGTON EXPRESSWAY  
#134  
JACKSONVILLE, FL 32225

**Current Mailing Address:**

3565 COPPER RD  
JACKSONVILLE, FL 32218

**New Mailing Address:**

9378 ARLINGTON EXPRESSWAY  
#134  
JACKSONVILLE, FL 32225

**FEI Number:** 68-0568837

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PEPER, RICHARD C JR  
8833 PERIMETER PARK BLVD  
SUITE 602  
JACKSONVILLE, FL 32216 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: PD ( ) Delete  
Name: JONES, JEFFERY  
Address: 9378 ARLINGTON EXPRESSWAY  
City-St-Zip: JACKSONVILLE, FL 32225

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

Title: PD (X) Change ( ) Addition  
Name: JONES, JEFFREY  
Address: 9378 ARLINGTON EXPRESSWAY  
City-St-Zip: JACKSONVILLE, FL 32225

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: JEFFREY JONES

PD

01/11/2005

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date