2005 FOR PROFIT CORPORATION ANNUAL REPORT

7/11/2005-90116-024-\$150.00-\$150.00

mi mo

DOCUMENT # P0400065841 1. Entity Name AGS RESOURCES, INC.							05 SEP		4 4: 0	•
	e of Business 100D FOREST DR CH, FL 33445	4	ailing Address 910 SHERWOOD FORE ELRAY BEACH, FL 33			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	SECRE; TALLAHA			
2. Principal Place of Business		3.	3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #. etc.			07082005	Chg-P	CR2E03	34 (10/03)	
City & State		1	City & State			4.75 Numbe	09782	62		plied For at Applicable
Zip	Country		Žip 	Count	иу	<u> </u>	of Status Desired		\$8.75 Add	
	6. Name and Addre	ss of Current Regis	itered Agent			7. Name and	Address of New	Registered A	gent	
STANARD, ANNE M 4910 SHERWOOD FOREST DR DELRAY BEACH, FL 33445			Name Street Address ((P.O. Box Numbe	r is Not Acceptabl	le)			
					City			FL	Zip Cod	9
	named entity submits the		ourpose of changing its	registere	ed office or registe	red agent, or bot	h, in the State of F	lorida. Iam fa	amiliar with,	and accept
SIGNATURE.										
SIGNATIONE.										
SIGNATURE	Signature, sycled or printed name	of registered agent and lide	é applicable. (NOTÉ	: Registered	Agent eignature require	d when reinstating)		DATE		
FI	Signature, word or preciod name LE NOWIII FEE IS ue by September	\$150.00	9. Election Campai Trust Fund Contr	gn Finan	cing _ \$5	i.00 May Be	in accordance corporation did	with s. 607.	193(2)(b), the prior r	F.S., the notice.
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12. I hereby certify that the information supplied with this filing does not qualify 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 signature shall have the same legal effect as if made under oath; that I am an officer or of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Anne Stanard
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNANG OFFICER OR DIRECTOR

561-926-2565