2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 04, 2005
Secretary of State

DOCUMENT# P04000091233

Entity Name: NORTH FLORIDA COMPUTER SOLUTIONS, INC.

Current Principal Place of Business:

120 NW 76TH DR SUITE B
GAINESVILLE, FL 32607

New Principal Place of Business:

PO BOX 358494
GAINESVILLE, FL 32635

Current Mailing Address:

120 NW 76TH DR SUITE B
GAINESVILLE, FL 32607

New Mailing Address:

PO BOX 358494
GAINESVILLE, FL 32635 US

FEI Number: 01-0814744 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COLEMAN, RICHARD E
120 NW 76TH DR SUITE B
GAINESVILLE, FL 32607 US

Name and Address of New Registered Agent:

SARRELLS, SCOTT B
284 SW REMINGTON CT
LAKE CITY, FL 32024 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: SCOTT B SARRELLS 01/04/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: COLEMAN, RICHARD E
Address: 120 NW 76TH DR SUITE B
City-St-Zip: GAINESVILLE, FL 32607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: SARRELLS, SCOTT B
Address: PO BOX 358494
City-St-Zip: GAINESVILLE, FL 32635

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: SCOTT B SARRELLS D 01/04/2005
Electronic Signature of Signing Officer or Director Date