2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000117746

Entity Name: A TECHNOLOGY SOURCE, INC.

FILED Apr 11, 2005 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:		
4737 GARDENBROOK LN ORLANDO, FL 32821				407 CENTRAL PARK DRV. SANFORD, FL 32771		
Current Mailing Address:				New Mailing Address:		
4737 GARDENBROOK LN ORLANDO, FL 32821			27.1.1	407 CENTRAL PARK DRV. SANFORD, FL 32771		
FEI Number:	20-1484774	FEI Number Applied For()	FEI Number No	t Applicable()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name	and Address o	f New Registered Agent:	
HUTCHINS, ROBERT J 400 N WYMORE RD STE 110 WINTER PARK, FL 32789 US				ESMONT, THOMAS D 407 CENTRAL PARK DRV. SANFORD, FL 32771 US		
	named entity s of Florida.	submits this statement for the	purpose of chang	ging its registere	d office or registered agent, or both,	
SIGNATURE: THOMAS ESMONT				04/11/2005		
Electronic Signature of Registered Agent				Date		
Election Can	npaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	D () ESMONT, THOI 4737 GARDENI ORLANDO, FL	BROOK LN	Title: Name: Addres City-St-		() Change () Addition	
Title: Name: Address: City-St-Zip:	. ,		Title: Name: Addres City-St-		() Change () Addition	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Addres City-St		()Change(X)Addition HLEEN H ESS LOFT PLACE Y, FL 32746	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Addres City-St-		ESS LOFT PLACE	

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: THOMAS ESMONT PRES 04/11/2005