

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000127991

Entity Name: GEEK SOLUTIONS, INC.

FILED
Apr 06, 2005
Secretary of State

Current Principal Place of Business:

520 BAYOU CIRCLE
FREEPORT, FL 32439 US

New Principal Place of Business:

223 PISCES DRIVE
SANTA ROSA BEACH, FL 32459 US

Current Mailing Address:

520 BAYOU CIRCLE
FREEPORT, FL 32439 US

New Mailing Address:

223 PISCES DRIVE
SANTA ROSA BEACH, FL 32459 US

FEI Number: 65-1234086

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEARD, CHRISTOPHER
520 BAYOU CIRCLE
FREEPORT, FL 32439 US

Name and Address of New Registered Agent:

BEARD, CHRISTOPHER
223 PISCES DRIVE
SANTA ROSA BEACH, FL 32459 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: CHRISTOPHER BEARD

04/06/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DIR () Delete
Name: BEARD, CHRISTOPHER S
Address: 520 BAYOU CIRCLE
City-St-Zip: FREEPORT, FL 32439 US

Title: P () Delete
Name: BEARD, CHRISTOPHER S
Address: 520 BAYOU CIRCLE
City-St-Zip: FREEPORT, FL 32439 US

Title: SEC () Delete
Name: BEARD, VICTORIA S
Address: 520 BAYOU CIRCLE
City-St-Zip: FREEPORT, FL 32439 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change () Addition
Name: BEARD, CHRISTOPHER S
Address: 223 PISCES DRIVE
City-St-Zip: SANTA ROSA BEACH, FL 32459 US

Title: P (X) Change () Addition
Name: BEARD, CHRISTOPHER S
Address: 223 PISCES DRIVE
City-St-Zip: SANTA ROSA BEACH, FL 32459 US

Title: SEC (X) Change () Addition
Name: BEARD, VICTORIA S
Address: 223 PISCES DRIVE
City-St-Zip: SANTA ROSA BEACH, FL 32459 US

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: CHRISTOPHER BEARD

DIR

04/06/2005

Electronic Signature of Signing Officer or Director

Date