

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000129142

Entity Name: PEACE OF MIND SERVICES, INC.

FILED  
Apr 28, 2005  
Secretary of State

## Current Principal Place of Business:

P.O. BOX 5012  
LAKELAND, FL 338075012

## New Principal Place of Business:

5420 WILMINGTON CIRCLE  
APT. #105  
LAKELAND, FL 33813 US

## Current Mailing Address:

P.O. BOX 5012  
LAKELAND, FL 338075012

## New Mailing Address:

P.O. BOX 5012  
LAKELAND, FL 338075012 US

FEI Number: 51-0524918

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DAVIDSON, HOLLY S  
5420 WILMINGTON CIRCLE, #105  
LAKELAND, FL 33813 US

## Name and Address of New Registered Agent:

DAVIDSON, HOLLY S  
5420 WILMINGTON CIRCLE  
APT. #105  
LAKELAND, FL 33813 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: HOLLY S. DAVIDSON

04/28/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Change (X) Addition  
Name: DAVIDSON, HOLLY S  
Address: 5420 WILMINGTON CIRCLE, APT. #105  
City-St-Zip: LAKELAND, FL 33813 US

Title: V/S ( ) Change (X) Addition  
Name: DAVIDSON, PHILIP E  
Address: 5420 WILMINGTON CIRCLE, APT. #105  
City-St-Zip: LAKELAND, FL 33813

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: HOLLY S. DAVIDSON

P

04/28/2005

Electronic Signature of Signing Officer or Director

Date