2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000140252

Entity Name: AFFORDABLE PARALEGAL SOLUTIONS, INC.

FILED Mar 17, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1532 US 41 BYPASS SOUTH 611 ALBEE FARM ROAD PMB 214 NOKOMIS, FL 34275

VENICE, FL 34293-103 2

New Mailing Address: Current Mailing Address:

1532 US 41 BYPASS SOUTH 611 ALBEE FARM ROAD PMB 214 NOKOMIS, FL 34275 VENICE, FL 34293-103 2

FEI Number: 20-1752380 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BOLAM, LAURIE A BOLAM, LAURIE A 611 ALBEE FARM ROAD 1532 US 41 BYPASS SOUTH PMB 214 NOKOMIS, FL 34275 VENICE, FL 34293 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: LAURIE A. BOLAM 03/17/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete BOLAM, LAURIE A BOLAM, LAURIE A Name: Name: 1532 US 41 BYPASS SOUTH Address: 611 ALBEE FARM ROAD Address: City-St-Zip: VENICE, FL 34293 City-St-Zip: NOKOMIS, FL 34275

() Delete Title: VΡ Title: (X) Change () Addition

DROST, HERMINIA P Name: Name: BOLAM, WILLIAM L 1532 US 41 BYPASS SOUTH Address: 611 ALBEE FARM ROAD Address: VENICE, FL 34293 NOKOMIS, FL 34275 City-St-Zip: City-St-Zip:

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.

Ρ SIGNATURE: LAURIE A. BOLAM 03/17/2005