

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 30, 2007 8:00 am
Secretary of State

03-30-2007 90142 018 ***150.00

DOCUMENT # P04000149487

1. Entity Name

TECHNOLOGY SUPPORT SYSTEMS, INC.



Principal Place of Business
1731 WAKEFIELD DR
BRANDON FL 33511

Mailing Address
1731 WAKEFIELD DR
BRANDON FL 33511



2. Principal Place of Business - No P.O. Box #

9213 LITHIA

3. Mailing Address

Suite, Apt. #, etc.

PINECREST ROAD

Suite, Apt. #, etc.

City & State

LITHIA, FL

City & State

Zip

33547

Country

HILLSBOROUGH

Zip

Country

4. FEI Number

27-0108429

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MARLOW & MCNABB, PA
1560 WEST CLEVELAND ST
TAMPA FL 33606

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DP ☐ Delete
NAME PARISH, PATRICK E
STREET ADDRESS 1731 WAKEFIELD DR
CITY- ST- ZIP BRANDON FL 33511

TITLE DST ☐ Delete
NAME COOPER, STEPHANIE
STREET ADDRESS 1731 WAKEFIELD DR
CITY- ST- ZIP BRANDON FL 33511

TITLE AS ☐ Delete
NAME TALAMANTES, FERNANDO
STREET ADDRESS 2801 EAST WILLIAMS RD
CITY- ST- ZIP PLANT CITY FL 33565

TITLE AS ☐ Delete
NAME COOPER, RICHARD
STREET ADDRESS 302 BROCKFIELD DRIVE
CITY- ST- ZIP SUN CITY CENTER FL 33573

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

Patrick E. Parish - Patrick E. Parish - Pres. 3-20-07 661-4420

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #