

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000154855

Entity Name: STOP - LOSS SERVICES, INC.

FILED
Apr 20, 2005
Secretary of State

Current Principal Place of Business:

P O BOX 622705
OVIEDO, FL 327622705

New Principal Place of Business:

P O BOX 622705
642 GREEN ROCK CT
APOPKA, FL 32712

Current Mailing Address:

P O BOX 622705
OVIEDO, FL 327622705

New Mailing Address:

P O BOX 150218
ALTAMONTE SPRINGS, FL 327159918

FEI Number: 20-1884550

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEUKAMM, MICHAEL E
301 E PINE ST
STE 1400
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GOLBUFF, THOMAS J
Address: 642 GREEN ROCK CT
City-St-Zip: APOPKA, FL 32712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
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.

SIGNATURE: THOMAS J. GOLBUFF

PRES

04/20/2005

Electronic Signature of Signing Officer or Director

Date