

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000017875

FILED
Aug 27, 2007
Secretary of State

Entity Name: TRYGAR CONSULTING SERVICES, INC.

Current Principal Place of Business:

1819 MASSACHUSETTS AVE.
LYNN HAVEN, FL 32444

New Principal Place of Business:

Current Mailing Address:

1819 MASSACHUSETTS AVE.
LYNN HAVEN, FL 32444

New Mailing Address:

FEI Number: 20-2488686

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRYGAR, RONALD PRES.
3229 RIDDLE DR
TALLAHASSEE, FL 32309 US

Name and Address of New Registered Agent:

TRYGAR, RONALD PRES.
1819 MASSACHUSETTS AVE
LYNN HAVEN, FL 32444 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: RONALD L TRYGAR

08/27/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: TRYGAR, RONALD
Address: 3229 RIDDLE DR
City-St-Zip: TALLAHASSEE, FL 32309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: TRYGAR, RONALD
Address: 1819 MASSACHUSETTS AVE
City-St-Zip: LYNN HAVEN, FL 32444

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: RONALD L TRYGAR

PRES

08/27/2007

Electronic Signature of Signing Officer or Director

Date