

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000063963

Entity Name: SNR SERVICES, INC.

FILED
Apr 24, 2006
Secretary of State

Current Principal Place of Business:

6755 HAMLOCK ROAD
OCALA, FL 34472

New Principal Place of Business:

6755 HEMLOCK ROAD
OCALA, FL 34472

Current Mailing Address:

6755 HAMLOCK ROAD
OCALA, FL 34472

New Mailing Address:

6755 HEMLOCK ROAD
OCALA, FL 34472

FEI Number: 20-2772581

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOCHAN, THOMAS
6755 HAMLOCK ROAD
OCALA, FL 34472 US

Name and Address of New Registered Agent:

LOCHAN, THOMAS
6755 HEMLOCK ROAD
OCALA, FL 34472 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: THOMAS LOCHAN

04/24/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LOCHAN, THYOMAS
Address: 6755 HAMLOCK ROAD
City-St-Zip: OCALA, FL 34472

Title: V () Delete
Name: LOCHAN, SARASWATTIE
Address: 6755 HAMLOCK ROAD
City-St-Zip: OCALA, FL 34472

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LOCHAN, THOMAS
Address: 6755 HEMLOCK ROAD
City-St-Zip: OCALA, FL 34472

Title: V (X) Change () Addition
Name: LOCHAN, SARASWATTIE
Address: 6755 HEMLOCK ROAD
City-St-Zip: OCALA, FL 34472

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS LOCHAN

P

04/24/2006

Electronic Signature of Signing Officer or Director

Date