

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000075381

FILED
Mar 06, 2006
Secretary of State

Entity Name: TRI-ANGLER SERVICES, INC.

Current Principal Place of Business:

1620 CANTERBURY DRIVE
INDIALANTIC, FL 32903

New Principal Place of Business:

Current Mailing Address:

1620 CANTERBURY DRIVE
INDIALANTIC, FL 32903

New Mailing Address:

FEI Number: 54-2180899

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NARDINOCCHI, JOE
1620 CANTERBURY DRIVE
INDIALANTIC, FL 32903 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: NARDINOCCHI, JOE
Address: 1620 CANTERBURY DRIVE
City-St-Zip: INDIALANTIC, FL 32903

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: NARDINOCCHI, JOE M PRESIDE
Address: 1620 CANTERBURY DRIVE
City-St-Zip: INDIALANTIC, FL 32903

Title: VICE () Change (X) Addition
Name: SIMONS, TODD A VICE
Address: 12202 STONEY BROOK DRIVE
City-St-Zip: MANASSAS, VA 22012

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: JOE NARDINOCCHI

PRES

03/06/2006

_____ Electronic Signature of Signing Officer or Director

_____ Date