

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000098145

FILED
Jul 06, 2006
Secretary of State

Entity Name: ASSISSI MANAGEMENT SERVICES INC.

Current Principal Place of Business:

605 OLE PLANTATION DR
BRANDON, FL 33511

New Principal Place of Business:

Current Mailing Address:

605 OLE PLANTATION DR
BRANDON, FL 33511

New Mailing Address:

FEI Number: 04-3818398

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, GREGORY L
605 OLE PLANTATION DR
BRANDON, FL 33511 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

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: PSTD () Delete
Name: JOHNSON, GREGORY
Address: 605 OLE PLANTATION DR
City-St-Zip: BRANDON, FL 33511

Title: D () Delete
Name: CALTABIANO, ALFRED
Address: 4511 REOLA DR
City-St-Zip: DOVER, FL 33527

Title: D () Delete
Name: MCCALL, RICHARD S
Address: 4511 REOLA RD
City-St-Zip: DOVER, 33527

Title: D () Delete
Name: HORTON, BETTY
Address: 605 OLE PLANTATION DR
City-St-Zip: BRANDON, FL 33511

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: GREGORY LYNN JOHNSON

PSTD

07/06/2006

Electronic Signature of Signing Officer or Director

Date