

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000139034

Entity Name: COMPUTER AGE TECH SPECIALIST, INC

FILED
Apr 22, 2006
Secretary of State

Current Principal Place of Business:

2201 SW COLLEGE ROAD
#5
OCALA, FL 34474

New Principal Place of Business:

Current Mailing Address:

2201 SW COLLEGE ROAD
#5
OCALA, FL 34474

New Mailing Address:

FEI Number: 20-3598621

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COMPUTERIZED ACCOUNTING & TAX SPECIALIST,
2201 SW COLLEGE ROAD
#5
OCALA, FL 34474 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: VP () Delete
Name: SCHMIEDER, PAUL
Address: 9005 N GOLFWIEW DRIVE
City-St-Zip: CITRUS SPRINGS, FL 34434

Title: P () Delete
Name: MUISE, BRANDON J
Address: 3920 SW 30TH STREET LOT #C37
City-St-Zip: OCALA, FL 34474

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SCHMIEDER, PAUL
Address: 9005 N GOLFWIEW DRIVE
City-St-Zip: CITRUS SPRINGS, FL 34434

Title: D (X) Change () Addition
Name: MUISE, BRANDON J
Address: 3920 SW 30TH STREET LOT #C37
City-St-Zip: OCALA, FL 34474

Title: D () Change (X) Addition
Name: FOWLER, MICHAEL A
Address: 7 CEDAR TREE COURT
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: PAUL SCHMIEDER

D

04/22/2006

Electronic Signature of Signing Officer or Director

Date