

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

8/28/2007-90024-010-\$150.00-\$150.00

DOCUMENT # P06000040703 1. Entity Name CHARLES R. FOSTER CONSULTING SERVICES, INC.						FILED 07 SEP 19 PM 12:31 SECRETARY OF STATE TALLAHASSEE, FLORIDA 2nd MOORE CR2E034 (4/07)																													
Principal Place of Business 1861 SOUTH PATRICK DRIVE #116 INDIAN HARBOUR BEACH FL 32937				Mailing Address 1861 SOUTH PATRICK DRIVE #116 INDIAN HARBOUR BEACH FL 32937																															
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.				3. Mailing Address Suite, Apt. #, etc.																															
City & State Zip Country				4. FEI Number 04-3850966																															
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable																															
6. Name and Address of Current Registered Agent FOSTER, CHARLES R 1861 SOUTH PATRICK DRIVE #116 INDIAN HARBOUR BEACH FL 32937				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																															
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE 08/03/07 <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-elected)</small>																																			
FILE NOW!!! FEE IS \$550.00 DUE BY September 5, 2007 Make Check Payable to Florida Department of State				S 607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. <input checked="" type="checkbox"/>																															
9. Election Campaign Financing Trust Fund Contribution. <input checked="" type="checkbox"/> \$5.00 May Be Added to Fees																																			
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">NAME</td> <td style="width: 20%;">Delete</td> </tr> <tr> <td>NAME</td> <td>FOSTER, CHARLES R</td> <td><input type="checkbox"/></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1861 SOUTH PATRICK DRIVE #116</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>INDIAN HARBOUR BEACH FL 32937</td> <td></td> </tr> </table>				TITLE	NAME	Delete	NAME	FOSTER, CHARLES R	<input type="checkbox"/>	STREET ADDRESS	1861 SOUTH PATRICK DRIVE #116		CITY-ST-ZIP	INDIAN HARBOUR BEACH FL 32937		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">NAME</td> <td style="width: 20%;">Change</td> <td style="width: 10%;">Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td></td> </tr> </table>				TITLE	NAME	Change	Addition	NAME		<input type="checkbox"/>	<input type="checkbox"/>	STREET ADDRESS				CITY-ST-ZIP			
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.																																			
SIGNATURE:				DATE: 08/01/08																															
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				321 223-7432																															