

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000050274

FILED  
Feb 01, 2010  
Secretary of State

**Entity Name:** PRECISION TECHNOLOGY SOLUTIONS, INC.

**Current Principal Place of Business:**

803 E 7TH AVENUE  
NEW SMYRNA BEACH, FL 32169

**New Principal Place of Business:**

**Current Mailing Address:**

803 E 7TH AVENUE  
NEW SMYRNA BEACH, FL 32169

**New Mailing Address:**

**FEI Number:** 20-8918342      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

SORENSEN, PAULA  
803 E 7TH AVENUE  
NEW SMYRNA BEACH, FL 32169      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:** T  
**Name:** GREENE, DAN  
**Address:** 821 EAGLE POINT DRIVE  
**City-St-Zip:** PORT ORANGE, FL 32092

**Title:** S  
**Name:** SORENSEN, GREG  
**Address:** 803 E 7TH AVENUE  
**City-St-Zip:** NEW SMYRNA BEACH, FL 32169

**Title:** VP  
**Name:** GREENE, KAREN  
**Address:** 821 EAGLE POINT DRIVE  
**City-St-Zip:** PORT ORANGE, FL 32092

**Title:** P  
**Name:** SORENSEN, PAULA  
**Address:** 803 E 7TH AVENUE  
**City-St-Zip:** NEW SMYRNA BEACH, FL 32169

I hereby 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 all other like empowered.

**SIGNATURE:** GREG SORENSEN

S

02/01/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date