


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 01, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # P23819**  
1. Entity Name  
**INDEPENDENT FIELD SERVICES, INC.**



Principal Place of Business  
**P.O. BOX 20172  
BOWLING GREEN, KY 42102-6172**

Mailing Address  
**P.O. BOX 20172  
BOWLING GREEN, KY 42102-6172**

**DO NOT WRITE IN THIS SPACE**



03282005 No Chg-P CR2E034 (10/03)

4. FEI Number  
**61-1128841**

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

Applied For  
Not Applicable

6. Name and Address of Current Registered Agent

**YORK, CHARLES E JR  
5440 NW 33RD AVE STE 110  
FORT LAUDERDALE, FL 33309**

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when relocating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TVD YORK, CHARLES 5440 NW 33RD AVE STE 110 FORT LAUDERDALE, FL 33309</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PDD WISEMAN, PHIL B. 946 SEAREY WAY BOWLING GREEN, KY 42103</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SVD EDWARDS, LEONARD 946 SEAREY WAY BOWLING GREEN, KY 42103</b>
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04/01/05-80046-009 158.75

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:**  **3R/JP 3-28-05 270-781-6036**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #