

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P40314

FILED
Apr 17, 2006
Secretary of State

Entity Name: ANDESA SERVICES, INC.

Current Principal Place of Business:

3435 WINCHESTER RD
STE 401
ALLENTOWN, PA 18104 US

New Principal Place of Business:

Current Mailing Address:

3435 WINCHESTER RD
STE 401
ALLENTOWN, PA 18104 US

New Mailing Address:

FEI Number: 23-2545253 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYES ST.
STE. 105
TALLAHASSEE, FL 32301 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: D () Delete
Name: WALKER, JOHN E
Address: 4317 SANCTUARY WAY
City-St-Zip: BONITA SPRINGS, FL 34134

Title: D () Delete
Name: BRIGGS, MALCOLM N
Address: 1717 WILDBERRY ROAD
City-St-Zip: BETHLEHEM, PA

Title: D () Delete
Name: PENDLETON, III, GEORGE F
Address: 30 LOWER TUCKAHOE RD W
City-St-Zip: RICHMOND, VA 23233

Title: D () Delete
Name: COLLIER, VINCEN P
Address: 8986 ROCKY LAKE CT.
City-St-Zip: SARASOTA, FL 34238

Title: T () Delete
Name: YOUNG, RODMAN D
Address: 827 W. MARKET ST.
City-St-Zip: BETHLEHEM, PA 18018

Title: PD () Delete
Name: CLEMENT, CHARLES E
Address: 4080 GUBITOSI DR
City-St-Zip: COOPERSBURG, PA 18036

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
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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: CHARLES CLEMENT

PD

04/17/2006

Electronic Signature of Signing Officer or Director

_____ Date