2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000019325

Entity Name: COMMUNITY DEVELOPMENT SERVICES, INC.

FILED Jan 05, 2006 Secretary of State

Current Principal Place of Busi	ness: New	Principal Place of Bus	siness:
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5904 NORTHRIDGE DRIVE NAPLES, FL 34110 US

Current Mailing Address: New Mailing Address:

5904 NORTHRIDGE DRIVE NAPLES, FL 34110 US

FEI Number: 65-0401652 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SALVATORI & WOOD, P.L.
4001 TAMIAMI TRAIL N
SUITE 330
NAPLES, FL 34103 US
SALVATORI & WOOD, P.L.
4001 TAMIAMI TRAIL NORTH
SUITE 330
NAPLES, FL 34103 US

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: LEO J. SALVATORI 01/05/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition DPST () Delete Title: DPST SHEVILIN, ROBERT E JR SHEVLIN, ROBERT E JR Name: Name: 5904 NORTHRIDGE DRIVE 5904 NORTHRIDGE DRIVE Address: Address: City-St-Zip: NAPLES, FL 34110 US City-St-Zip: NAPLES, FL 34110 US

Title: VP () Delete Title: () Change () Addition

 Name:
 SHEVLIN, LANA I
 Name:

 Address:
 5904 NORTHRIDGE DRIVE
 Address:

 City-St-Zip:
 NAPLES, FL 34110 US
 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: ROBERT E. SHEVLIN, JR. DPST 01/05/2006