2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000080278

Entity Name: CENTRECORP MANAGEMENT SERVICES, INC.

FILED Apr 15, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
SUITE 305	TH CLEMATIS M BEACH, FL							
Current Mailing Address:				New Mailing Address:				
SUITE 305	H CLEMATIS M BEACH, FL							
FEI Number:	65-0543896	FEI Number Applied For ()	FEI Num	ber Not Appli	cable ()	Certificat	e of Status De	sired ()
Name and	Address of C	urrent Registered Agent:		Name and	Address of	New Regi	stered Ager	nt:
SUITE 305 WEST PAL	TH CLEMATIS M BEACH, FL named entity s of Florida.		ourpose of	^r changing it	s registered	l office or re	egistered age	ent, or both,
OIOIVATOR		ic Signature of Registered Age	ent				Date	
Election Cam		Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	PRESTON, JOH	EMATIS STREET #305		Title: Name: Address: City-St-Zip:		()Change() Addition	
Title: Name: Address: City-St-Zip:	GREEN, ROBER 2851 JOHN ST			Title: Name: Address: City-St-Zip:	GREEN, ROE 2851 JOHN S			
Title: Name: Address: City-St-Zip:	HAMILTON, TON	EMATIS STREET #305		Title: Name: Address: City-St-Zip:		()Change() Addition	
Title: Name: Address: City-St-Zip:	KOSOY, DAVID	EMATIS STREET #305		Title: Name: Address: City-St-Zip:		()Change() Addition	
Title: Name: Address: City-St-Zip:	KOSOY, BRIAN ONE NORTH CL	Delete EMATIS STREET#305 EACH, FL 33401		Title: Name: Address: City-St-Zip:	KOSOY, BRI ONE NORTH	(X) Change(AN D CLEMATIS S I BEACH, FL	TREET#305	
Title: Name: Address: City-St-Zip:	SHREEVE, DAV	EMATIS STREET #305		Title: Name: Address: City-St-Zip:	COSTELLO, ONE NORTH	(X) Change(VINCENT J CLEMATIS S I BEACH, FL	TREET #305	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TOM HAMILTON V 04/15/2005