

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000018865

FILED
Apr 07, 2006
Secretary of State

Entity Name: THE FLORIDA TAX COLLECTORS SERVICE CORPORATION

Current Principal Place of Business:

225 S. ADAMS ST.
SUITE 200
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

PO BOX 1833
TALLAHASSEE, FL 323021833

New Mailing Address:

FEI Number: 59-3357136

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VAN ASSENDERP, H. KENZA
225 S. ADAMS ST.
SUITE 200
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: DALE SUMMERFORD,
Address: 16 S CALHOUN ST.
City-St-Zip: QUINCY, FL 32353

Title: P () Delete
Name: BURNHAM, GEORGE L.,
Address: S. OHIO AVE.
City-St-Zip: LIVE OAK, FL 32060

Title: D () Delete
Name: KANE, BERNARD
Address: 123 WEST INDIANA AVENUE
City-St-Zip: DELAND, FL 32720

Title: D () Delete
Name: SIKES, JUANITA
Address: 20 NORTH MAIN STREET, ROOM 112
City-St-Zip: BROOKSVILLE, FL 346012892

Title: T () Delete
Name: HEFFNER, PATSY
Address: POST OFFICE BOX 422105
City-St-Zip: KISSIMMEE, FL 34742

Title: D () Delete
Name: HENRIQUEZ, DANISE
Address: POST OFFICE BOX 1129
City-St-Zip: KEY WEST, FL 33041

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
Name:
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: GEORGE L. BURNHAM JR

MR.

04/07/2006

Electronic Signature of Signing Officer or Director

Date