

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000068405

FILED  
Feb 27, 2004  
Secretary of State

**Entity Name:** CONSULTING AND TECHNOLOGY SOLUTIONS, INC.

**Current Principal Place of Business:**

147 GLENWOOD AVE.  
MEADVILLE, PA 163354814

**New Principal Place of Business:**

**Current Mailing Address:**

147 GLENWOOD AVE.  
MEADVILLE, PA 163354814

**New Mailing Address:**

FEI Number: 65-0605500

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MULLIN, JAMES G  
2263 NW BOCA RATON BLVD., #205  
BOCA RATON, FL 33431 US

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

MULLIN, JAMES G  
2263 NW BOCA RATON BLVD, #205  
BOCA RATON, FL 33431 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: \_\_\_\_\_

Electronic Signature of Registered Agent

02/27/2004

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: SCHRODER, ERIN E  
Address: 147 GLENWOOD AVE  
City-St-Zip: MEADVILLE, PA 16335

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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: ERIN E. SCHRODER

D

02/27/2004

Electronic Signature of Signing Officer or Director

Date