

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000073307

Entity Name: WRITE-CHOICE SERVICES, INC.

FILED
Feb 17, 2005
Secretary of State

Current Principal Place of Business:

7216 HWY 202
THOMASVILLE, GA 31757 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5736
THOMASVILLE, GA 37758 US

New Mailing Address:

P.O. BOX 5736
THOMASVILLE, GA 31758 US

FEI Number: 59-3341159

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'DONNELL, SHARON
200 W COLLEGE AVE
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: LITHERLAND, JANET
Address: 7216 HWY 202
City-St-Zip: THOMASVILLE, GA 31757

Title: D () Delete
Name: LITHERLAND, STEVEN
Address: 2048 DOOMAR DRIVE
City-St-Zip: TALLAHASSEE, FL 32308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: JANET LITHERLAND

PRES

02/17/2005

Electronic Signature of Signing Officer or Director

Date