2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000007531

1. Entity Name

TBS/TOTAL BUSINESS SYSTEMS, INC.



Principal Place of Business

4231 WALNUT BEND

STE 3

JACKSONVILLE, FL 32257

Mailing Address

4231 WALNUT BEND

STE 3

JACKSONVILLE, FL 32257

FILED Apr 29, 2008 08:00 AN Secretary of State



DO NOT WRITE IN THIS SPACE

04172008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3365163

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

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ROWLAND, FREDDIE 4231 WALNUT BEND STE 5

JACKSONVILLE, FL 32257

the obligations of registered agent.

DO NOT WRITE IN THIS SPACE

SIGNATURE.		<u> </u>			7/2-108
Signature, typed or printed name of registered agent and tritle if applicable (NOTE Registered Agent signature required whom reinstating)					DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees			·
10.	OFFICERS AND DIREC	TORS			
TITLE	Р				
NAME	ROWLAND, FREDDIE				$\sim \sim 1.0$
STREET ADDRESS	10425 RUSSELL SAMPSON RD				\U0\0\0\0\deltatst62\
CITY-ST-ZIP	JACKSONVILLE, FL 32259				- 05/20/0 8-0 0020-010 138.75
TITLE	VD				
NAME	STERN, MICHAEL				
STREET ADDRESS	11465 MANDARIN GLEN CIRCLE EAS	ΙT			U00000931097
CITY-ST-ZIP	JACKSONVILLE, FL				05/22/08-80001-009 150.00
TITLE	STD				02,55,00,00001,002,120.00
NAME CYPECY APPROACO	ROWLAND, PAULA	4			
STREET ADDRESS CITY-ST-ZIP	10425 RUSSELL SAMPSON RD	i		חח	NOT WRITE
	JACKSONVILLE, FL 32259				TOT VALUE
TITLE		1		IN 7	THIS SPACE
NAME STREET ADDRESS					
CITY-ST-ZIP					
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NAME					
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CITY-ST-ZIP					
TITLE					
NAME					11. 11. 11. 11. 11. 11. 11. 11. 11. 11.
STREET ADDRESS					**************************************
CITY - ST - ZIP		_			
12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					

8. 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. I am familiar with, and accept