2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 30, 2005
Secretary of State

DOCUMENT# P96000092464

Entity Name: PATRIOT CONVENTION SERVICES, INC.

Current Principal Place of Business:

2530 N POWERLINE RD
#404
POMPANO BEACH, FL 33069 US

New Principal Place of Business:

6600 N ANDREWS AVENUE
#160
FT LAUDERDALE, FL 33309 US

Current Mailing Address:

6600 N ANDREWS AVE
STE 160
FORT LAUDERDALE, FL 33309 US

New Mailing Address:

FEI Number: 65-0706635 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HILLIARD, JAMES W
6600 N ANDREWS AVENUE #160
FORT LAUDERDALE, FL 33309 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: HILLARD, JAMES C
Address: 7 OCEAN PLACE
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: PD ( ) Delete
Name: LOONEY, KEVIN M
Address: 6600 N ANDREWS AVENUE #160
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: VPS ( ) Delete
Name: HILLIARD, JAMES W
Address: 6600 N ANDREWS AVENUE #160
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: VPT ( ) Delete
Name: HINDES, RICHARD C
Address: 6600 N ANDREWS AVENUE #160
City-St-Zip: FORT LAUDERDALE, FL 33309

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:

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: RICHARD C. HINDES VPT 06/30/2005

Electronic Signature of Signing Officer or Director Date