

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000012465

Entity Name: REPEATER SOLUTIONS, INC.

FILED  
May 01, 2007  
Secretary of State

## Current Principal Place of Business:

553 HAMLET DR  
DAYTONA BEACH, FL 32127

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 11077  
DAYTONA BCH, FL 32120

## New Mailing Address:

PO BOX 290698  
PORT ORANGE, FL 32129 US

FEI Number: 59-3429255

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LINSLER, DAVID  
553 HAMLET DR  
PT ORANGE, FL 32127 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: P ( ) Delete  
Name: LINSLER, DAVID  
Address: 553 HAMLET DR  
City-St-Zip: PT ORANGE, FL 32127

## 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 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: DAVID LINSLER

P

05/01/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date