


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2007 08:00 AM
Secretary of State

DOCUMENT # P97000068254
 1. Entity Name
 ADVANCED TRANSMISSION SERVICE, INC.



Principal Place of Business: 212 EARLY STREET, NICEVILLE, FL 32578
 Mailing Address: 212 EARLY STREET, NICEVILLE, FL 32578

DO NOT WRITE IN THIS SPACE

04022007 No Chg-P CR2E034 (11/05)

4. FEI Number: 59-3461772 Applied For: Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 CUMMINS, THOMAS E
 96 ALDEN LANE
 FREEPORT, FL 32439

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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 the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	CUMMINS, THOMAS E
STREET ADDRESS	96 ALDEN LANE
CITY-ST-ZIP	FREEPORT, FL 32439
TITLE	ST
NAME	CUMMINS, RENE R
STREET ADDRESS	96 ALDEN LANE
CITY-ST-ZIP	FREEPORT, FL 32439
TITLE	VP
NAME	KOSTELIC, RAYMOND M
STREET ADDRESS	710-B CYPRESS DR.
CITY-ST-ZIP	NICEVILLE, FL 32578
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 04/13/07-80008-003 150.00

12. I hereby certify that the information supplied with this filing 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.

SIGNATURE: Rene R. Cummins 04-02-07 (850)678-8830
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #