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Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90057 034 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000008173

1. Corporation Name

ADVANCED TECHNICAL SERVICES, INC.



Principal Place of Business

106 SOUTH LAKE AVENUE
ORLANDO FL 32801

Mailing Address

106 SOUTH LAKE AVENUE
ORLANDO FL 32801

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/26/1998

4. FEI Number

59-3489077

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☒ No

2. Principal Place of Business

21 29206 OLD MILL W.

2a. Mailing Address

26 PO BOX 1289

Suite, Apt. #, etc.

27

City & State

28 TAVARES, FL

Zip

29 32778

Country

30 USA

City & State

23 TAVARES, FL USA

Zip

24 32778

Country

25 USA

9. Name and Address of Current Registered Agent

BLACK, RONALD W
106 SOUTH LAKE AVENUE
ORLANDO FL 32801

10. Name and Address of New Registered Agent

81 Name

JAMES E. BARKER JR

82 Street Address (P.O. Box Number is Not Acceptable)

29206 OLD MILL W.

83

84

City TAVARES

FL

85 Zip Code

32778

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE:

James E. Barker Jr
Signature, typed or printed name of registered agent and title if applicable

JAMES E. BARKER
(NOTE: Registered Agent signature required when reinstating)

4/26/99
Date

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME D
BARKER, JAMES E
STREET ADDRESS 29206 OLD MILL WEST
CITY-ST-ZIP TAVARES FL 32778

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change

☐ Addition

☐ Change

☐ Addition

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☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

James E. Barker Jr
SIGNATURE AND TYPED OF: PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/99
Date

352-343-5119
Daytime Phone #

CR2E034 (1/98)