

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000033949

FILED
Apr 26, 2006
Secretary of State

Entity Name: DEBITS & CREDITS ACCOUNTING SERVICE, INC.

Current Principal Place of Business:

2225 HIDDEN LAKE DRIVE
UNIT #1
NAPLES, FL 341122779

New Principal Place of Business:

175 PALM DRIVE
UNIT # C
NAPLES, FL 34112

Current Mailing Address:

2225 HIDDEN LAKE DRIVE
UNIT #1
NAPLES, FL 341122779

New Mailing Address:

175 PALM DRIVE
UNIT # C
NAPLES, FL 34112

FEI Number: 59-3505678

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WAGNER, TERRY
2225 HIDDEN LAKE DRIVE
UNIT #1
NAPLES, FL 341122779 US

Name and Address of New Registered Agent:

WAGNER, TERRY
175 PALM DRIVE
UNIT # C
NAPLES, FL 34112 US

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:

04/26/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FELLEZ, THOMAS
Address: 2225 HIDDEN LAKE DR #1
City-St-Zip: NAPLES, FL 34112

Title: T () Delete
Name: WAGNER, TERRY TREASUR
Address: 2225 HIDDEN LAKE DR #1
City-St-Zip: NAPLES, FL 34112

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FELLEZ, THOMAS
Address: 175 PALM DRIVE UNIT # C
City-St-Zip: NAPLES, FL 34112

Title: T (X) Change () Addition
Name: WAGNER, TERRY TREASUR
Address: 175 PALM DRIVE UNIT # C
City-St-Zip: NAPLES, FL 34112

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS FELLEZ

PRES

04/26/2006

Electronic Signature of Signing Officer or Director

Date