2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000045867

Entity Name: CODING TECHNOLOGY SOLUTIONS, INC.

FILED Apr 20, 2005 Secretary of State

Current Principal Place of Business:			Now Princ	New Principal Place of Business:	
3341 CORN	MORANT COVI VILLE, FL 3222	E DR	Mew Fillic	ipai Fiace di Busilless.	
Current Ma	ailing Address	s:	New Maili	New Mailing Address:	
P.O. BOX 23009 JACKSONVILLE, FL 322413009					
FEI Number: 59-3516965 FEI Number Applied For () F			FEI Number Not Appl	icable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: SAWYER, CARL T JR 3341 CORMORANT COVE DRIVE JACKSONVILLE, FL 32223 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: Electronic Signature of Registered Agent			<u> </u>	Date	
Election Cam		Trust Fund Contribution ().			
OFFICERS AND DIRECTORS: ADI			ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	SAWYER, CARL	NT COVE DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SAWYER, CARL	NT COVE DRIVE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	SAWYER, LISA	NT COVE DRIVE	Title: Name: Address: City-St-Zip:	S (X) Change () Addition SAWYER, CARL T JR 3341 CORMORANT COVE DRIVE JACKSONVILLE, FL 32223	
Title: Name: Address: City-St-Zip:	SAWYER, CARL	NT COVE DRIVE	Title: Name: Address: City-St-Zip:	CEO (X) Change () Addition SAWYER, LISA A 3341 CORMORANT COVE DRIVE JACKSONVILLE, FL 32223	
Title: Name: Address: City-St-Zip:	T () I SAWYER, LISA A 3341 CORMORA JACKSONVILLE,	NT COVE DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition SAWYER, LISA A 3341 CORMORANT COVE DR JACKSONVILLE, FL 32223	

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: LISA A H SAWYER CEO 04/20/2005