## 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## Feb 20, 2004 08:00 AM DOCUMENT # P98000050495 **Secretary of State** NEXTECH SOLUTIONS, INC. Principal Place of Business Mailing Address 19286 QUIET OAK LANE BROOKESVILLE FL 34604 19286 QUIET OAK LANE BROOKESVILLE FL 34604 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) MOORE City & State City & State 4. FEi Number Applied For 59-3517913 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HOTCHKISS, RICHARD W JR. Street Address (P.O. Box Number is Not Acceptable) 19286 QUIET OAK LANE **BROOKSVILLE FL 34604** Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Change ☐ Delete TITLE Addition NAME HOTCHKISS, RICHARD W JR NAME U000000059170 STREET ADDRESS 19286 QUIET OAK LANE STREET ADDRESS 02/20/04-80070-014 150.00 BROOKSVILLE FL 34604 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete Change Addition NAME HOTCHKISS, NANCY A MARKE STREET ADDRESS 15470 MAGPIE ROAD STREET ADDRESS CITY-ST-ZIP **BROOKSVILLE FL 34614** CITY-ST-ZIP TITLE ☐ Delete THE Change ☐ Addition MAME HOTCHKISS, COLLEEN R NAME STREET ADDRESS 19286 QUIET OAK LANE STREET ADDRESS CITY-ST-ZIP **BROOKESVILLE FL 33604** CITY-ST-ZIP Delete TITE F Change Addition HOTCHKISS, RONALD W NAME MAME STREET ADDRESS 15470 MAGPIE ROAD STREET ADDRESS **BROOKSVILLE FL 34614** CITY-ST-ZIP CITY-ST-ZIP IIIUE ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP Addition TITLE ☐ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. 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 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.

ME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED