

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000060363

FILED  
Jan 08, 2004  
Secretary of State

Entity Name: PREMIER FIELD SERVICES, INC.

## Current Principal Place of Business:

740 PINECREST DR  
BARTOW, FL 33830 US

## New Principal Place of Business:

446 E. TILLMAN AVE  
LAKE WALES, FL 33853 US

## Current Mailing Address:

740 PINECREST DR  
BARTOW, FL 33830 US

## New Mailing Address:

446 E. TILLMAN AVE  
LAKE WALES, FL 33853 US

FEI Number: 59-3560497

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MCCAIN, JASON N  
140 PINECREST DR  
BARTOW, FL 33830

## Name and Address of New Registered Agent:

MCCAIN, JASON N  
446 E. TILLMAN AVE  
LAKE WALES, FL 33853

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: JASON MCCAIN

01/08/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MCCAIN, JASON  
Address: 740 PINECREST DR  
City-St-Zip: BARTOW, FL 33830

Title: VTS ( ) Delete  
Name: MCCAIN, PHILLIP M  
Address: 303 1ST AVE N  
City-St-Zip: LAKE WALES, FL 33853

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MCCAIN, JASON  
Address: 446 E TILLMAN AVE  
City-St-Zip: LAKE WALES, FL 33853

Title: VT (X) Change ( ) Addition  
Name: MCCAIN, PHILLIP M  
Address: 303 1ST AVE N  
City-St-Zip: LAKE WALES, FL 33853

Title: S ( ) Change (X) Addition  
Name: MCCAIN, LAUREN M  
Address: 446 E. TILLMAN AVE  
City-St-Zip: LAKE WALES, FL 33853

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: JASON MCCAIN

P

01/08/2004

Electronic Signature of Signing Officer or Director

Date