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PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



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

DOCUMENT # P98000077487

1. Corporation Name

NATIONAL SUPPORT SYSTEMS, INC.

Principal Place of Business

24 N. PINE CIRCLE  
BELLEAIR FL 33756

Mailing Address

24 N. PINE CIRCLE  
BELLEAIR FL 33756

2. Principal Place of Business

21 101 DRIFTWOOD LANE  
Suite, Apt. #, etc

22

City & State  
23 LARGO FL

Zip Country  
24 33770 25 USA

2a. Mailing Address

26 101 DRIFTWOOD LANE  
Suite, Apt. #, etc

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City & State  
28 LARGO FL

Zip Country  
29 33770 30 USA

9. Name and Address of Current Registered Agent

PARKER, STEVEN E  
15350 AMBERLY DR., SUITE 422  
TAMPA FL 33647

81 Name

82 BRIAN R. KELLER  
Street Address (P.O. Box Number is Not Acceptable)  
83 101 DRIFTWOOD LANE

84

City LARGO FL 85 Zip Code 33770

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

Signature, typed or printed name of registered agent and date of application

BRIAN R. KELLER

4/23/99

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D PARKER, STEVEN E  
24 N. PINE CIRCLE  
BELLEAIR FL 33756

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TITLE NAME STREET ADDRESS CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE PRESIDENT & DIRECTOR 12 NAME BRIAN R. KELLER 13 STREET ADDRESS 101 DRIFTWOOD LANE 14 CITY-ST-ZIP LARGO, FL 33770

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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BRIAN R. KELLER 4/23/99 (122)403-9969

FILED

09 APR 26 PM 12:19

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/08/1998

4. FEI Number

54-3531068

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

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

[ ] Yes [ ] No

10. Name and Address of New Registered Agent

CR2E034 (11/98)