## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000083369

BYROM, CHARES

2974 LANTANA LAKES DRIVE E.

JACKSONVILLE, FL 32246

Name:

Address: City-St-Zip:

Entity Name: SYSTEMS TECHNOLOGIES, INC.

Apr 20, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 9456 PHILLIPS HWY., SUITE 10 JACKSONVILLE, FL 32256 **Current Mailing Address: New Mailing Address:** 9456 PHILLIPS HWY., SUITE 10 JACKSONVILLE, FL 32256 FEI Number: 59-3534788 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BYROM, CHARLES 2974 LANTANA LAKES DRIVE E. JACKSONVILLE, FL 32246 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 Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition LANDIS, JAMES Name: Name: 5785 MOUNTAIN LAUREL DR. Address: Address: City-St-Zip: COOPERSBURG, PA 18036 City-St-Zip: Title: ٧S Title: () Delete () Change () Addition Name: PUSEY, RON Name: 7527 HIDDEN LAKE CR Address: Address: MECHANICSVILLE, VA 23111 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: CHARLES E BYROM ٧ 04/20/2004