

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000030641

FILED  
Jul 09, 2004  
Secretary of State

Entity Name: COMPLETE BUS SERVICES, INC.

**Current Principal Place of Business:**

212 301 BLVD. E.  
BRADENTON, FL 34208

**New Principal Place of Business:**

**Current Mailing Address:**

212 301 BLVD. E.  
BRADENTON, FL 34208

**New Mailing Address:**

FEI Number: 65-0906258

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GOULD, SUSAN  
212 301 BLVD. E.  
BRADENTON, FL 34208

**Name and Address of New Registered Agent:**

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: GOULD, SUSAN  
Address: 212 301 BLVD E  
City-St-Zip: BRADENTON, FL 34208

Title: D ( ) Delete  
Name: GOULD, WILLIAM  
Address: 212 301 BLVD E  
City-St-Zip: BRADENTON, FL 34208

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: SUSAN A. GOULD

D

07/09/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date