

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000056183

FILED  
Sep 05, 2006  
Secretary of State

**Entity Name:** AUERBACH INTERNATIONAL SUPPORT SYSTEMS, INCORPORATED

**Current Principal Place of Business:**

7380 SAND LAKE RD  
SUITE 500  
ORLANDO, FL 32819

**New Principal Place of Business:**

215 CELEBRATION PLACE  
SUITE 500  
CELEBRATION, FL 34747

**Current Mailing Address:**

PO BOX 470511  
CELEBRATION, FL 347470511

**New Mailing Address:**

FEI Number: 59-3582543      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

STEVENS, G. SADDINGTON  
7380 SAND LAKE RD  
SUITE 500  
ORLANDO, FL 32819 US

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

STEVENS, GARRISON S  
215 CELEBRATION PLACE  
SUITE 500  
CELEBRATION, FL 34747 US

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: GARRISON S STEVENS      09/05/2006  
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:      PSTD      ( ) Delete  
Name:      STEVENS, GARRISON S  
Address:      PO BOX 470511  
City-St-Zip:      CELEBRATION, FL 34747

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

Title:      PSTD      (X) Change ( ) Addition  
Name:      STEVENS, GARRISON S  
Address:      215 CELEBRATION PLACE; SUITE 500  
City-St-Zip:      CELEBRATION, FL 34747

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: GARRISON S STEVENS      D      09/05/2006  
Electronic Signature of Signing Officer or Director      Date