

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000070441

Entity Name: E TAX SERVICE, INC.

FILED
Jan 24, 2006
Secretary of State

Current Principal Place of Business:

67 WEST MAIN STREET
APOPKA, FL 32703

New Principal Place of Business:

Current Mailing Address:

67 WEST MAIN STREET
APOPKA, FL 32703

New Mailing Address:

FEI Number: 59-3594673

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOURN, RICK C
67 WEST MIAN STREET
APOPKA, FL 32703 US

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: BOURN, RICK C
Address: 9433
City-St-Zip: ALTAMONTE SPRUINGS, FL 32714

Title: D () Delete
Name: BEHRENS, TRAVIS K
Address: 583 BRANTLEY TERRACE WAY #302
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BOURN, RICK C
Address: 9433
City-St-Zip: ALTAMONTE SPRUINGS, FL 32714

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

Title: V () Change (X) Addition
Name: HOEKMAN, JOSEPH A
Address: 34352 TUSCANY AVE
City-St-Zip: SORRENTO, FL 32776

Title: V () Change (X) Addition
Name: HOEKMAN, KRISTIN K
Address: 34352 TUSCANY AVE
City-St-Zip: SORRENTO, FL 32776

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: RICK C BOURN

P

01/24/2006

Electronic Signature of Signing Officer or Director

Date