## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000107233

City-St-Zip:

City-St-Zip:

Title:

Name: Address: MIDDLEBURG, FL 32068

LAROSA, ROBERTO L

( ) Delete

2760 STONEHEDGE COURT SOUTH

JACKSONVILLE, FL 32224 US

FILED Apr 23, 2005 Secretary of State

Entity Name: TECHNICAL FIELD SERVICE, INC. **Current Principal Place of Business: New Principal Place of Business:** 161 BLANDING BLVD ORANGE PARK, FL 32073 US **Current Mailing Address: New Mailing Address:** 161 BLANDING BLVD ORANGE PARK, FL 32073 US FEI Number: 59-3613468 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: REYES, RONALD P 3984 CROSS CREEK RD. JACKSONVILLE, FL 32277 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition REYES, RONALD P REYES, RONALD P Name: Name: 3984 CROSS CREEK RD. 3984 CROSS CREEK RD Address: Address: City-St-Zip: JACKSONVILLE, FL 32277 City-St-Zip: JACKSONVILLE, FL 32277 Title: VΡ Title: VΡ () Delete (X) Change ( ) Addition Name: NELSON, RICHARD T Name: NELSON, RICHARD T 10873 CREEKVIEW DR. 10873 CREEKVIEW DR Address: Address: JACKSONVILLE, FL 32225 JACKSONVILLE, FL 32225 City-St-Zip: City-St-Zip: Title: Title: (X) Change ( ) Addition ( ) Delete SCHUETZ, ALAN L SCHUETZ, ALAN L Name: Name: 2526 HORESHOE BEND RD. 2526 HORESHOE BEND RD Address: Address:

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.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

MIDDLEBURG, FL 32068

() Change () Addition

SIGNATURE: ALAN L SCHUETZ S 04/23/2005