

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S54472

FILED
Jan 09, 2006
Secretary of State

Entity Name: FBS BUSINESS SYSTEMS CORPORATION

Current Principal Place of Business:

5430 W. CRENSHAW
TAMPA, FL 33634

New Principal Place of Business:

5430 W. CRENSHAW STREET
TAMPA, FL 33634

Current Mailing Address:

PO BOX 15365
TAMPA, FL 33684

New Mailing Address:

FEI Number: 59-3071291 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRUCK SR, MICHAEL L VP
5430 W CRENSHAW STREET
TAMPA, FL 33634 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: COB () Delete
Name: KRUCK, CHRISTINA C
Address: 19305 SIMPLICITY PLACE
City-St-Zip: LUTZ, FL 33558

Title: P () Delete
Name: KRUCK, CHRICTINA C
Address: 19305 SIMPLICITY PLACE
City-St-Zip: LUTZ, FL 33558

Title: VP () Delete
Name: KRUCK SR, MICHAEL L
Address: 19305 SIMPLICITY PLACE
City-St-Zip: LUTZ, FL 33558

Title: SEC () Delete
Name: KRUCK SR, MICHAEL L
Address: 19305 SIMPLICITY PLACE
City-St-Zip: LUTZ, FL 33558

Title: TRES () Delete
Name: KRUCK SR, MICHAEL L
Address: 19305 SIMPLICITY PLACE
City-St-Zip: LUTZ, FL 33558

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: KRUCK, CHRISTINA C
Address: 19305 SIMPLICITY PLACE
City-St-Zip: LUTZ, FL 33558

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

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 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: MICHAEL L KRUCK SR

VP

01/09/2006

Electronic Signature of Signing Officer or Director

_____ Date