

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S72561

Entity Name: GNS SERVICES, INC.

FILED  
Apr 23, 2004  
Secretary of State

## Current Principal Place of Business:

3722 CLEVELAND AVENUE  
FT. MYERS, FL 33901

## New Principal Place of Business:

## Current Mailing Address:

3722 CLEVELAND AVENUE  
FT. MYERS, FL 33901

## New Mailing Address:

FEI Number: 65-0276344

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WINER, STEVEN I.  
12800 UNIVERSITY DRIVE  
ONE UNIVERSITY PARK SUITE 600  
FT. MYERS, FL 33907 US

## Name and Address of New Registered Agent:

MORAUSKI, STEPHEN  
3722 CLEVELAND AVENUE  
FT. MYERS, FL 33901 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: JENNESE MORAUSKI

04/23/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PS ( ) Delete  
Name: MORAUSKI, STEPHEN  
Address: 3708 BLUE HERON DR.  
City-St-Zip: FT. MYERS, FL 33908

Title: VP ( ) Delete  
Name: MORAUSKI, JENNESE  
Address: 3708 BLUE HERON DR.  
City-St-Zip: FT. MYERS, FL 33908

Title: S ( ) Delete  
Name: MORAUSKI, JENNESE J  
Address: 3708 BLUE HERON DR.  
City-St-Zip: FT MYERS, FL 33908

Title: T ( ) Delete  
Name: MORAUSKI, STEPHEN W  
Address: 3708 BLUE HERON DR.  
City-St-Zip: FT MEYERS, FL 33908

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: JENNESE MORAUSKI

VP

04/23/2004

Electronic Signature of Signing Officer or Director

Date