

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S80908

**FILED**  
**Apr 12, 2012**  
**Secretary of State**

**Entity Name:** TELECOM NETWORK SERVICES, INC.

**Current Principal Place of Business:**

6327 SHADOW TREE LN  
LAKE WORTH, FL 33463

**New Principal Place of Business:**

**Current Mailing Address:**

6327 SHADOW TREE LN  
LAKE WORTH, FL 33463

**New Mailing Address:**

**FEI Number:** 65-0283052

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PARKS, RONALD  
6327 SHADOW TREE LN  
LAKE WORTH, FL 33463 US

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

PARKS, RONALD T  
6327 SHADOW TREE LN  
LAKE WORTH, FL 33463 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: RONALD PARKS

04/12/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DPS  
Name: PARKS, RONALD T  
Address: 6327 SHADOW TREE LN  
City-St-Zip: LAKE WORTH, FL 33463

Title: T  
Name: PARKS, RONALD T  
Address: 6327 SHADOW TREE LN  
City-St-Zip: LAKE WORTH, FL 33463

I hereby 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 all other like empowered.

SIGNATURE: RONALD PARKS

PRES

04/12/2012

Electronic Signature of Signing Officer or Director

Date