

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S82048

FILED
Apr 28, 2004
Secretary of State

Entity Name: RTA PRODUCTION SERVICES, INC.

Current Principal Place of Business:

12218 ORCHID LANE
THONOTOSASSA, FL 33592

New Principal Place of Business:

Current Mailing Address:

12218 ORCHID LANE
THONOTOSASSA, FL 33592

New Mailing Address:

FEI Number: 59-3091304

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WARD, TAMLYN R
12218 ORCHID LANE
THONOTOSASSA, FL 33592 US

Name and Address of New Registered Agent:

WARD, TAMLYN R
12218 ORCHID LANE
THONOTOSASSA, FL 33592 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: TAMLYN R. WARD

04/28/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WARD, TAMLYN R
Address: 122187 ORCHID LANE
City-St-Zip: THONOTOSASSA, FL 33592

Title: VSD () Delete
Name: WARD, LINDA C
Address: 12218 ORCHID LANE
City-St-Zip: THONOTOSASSA, FL 33592

Title: S (X) Delete
Name: WARD, LINDA C
Address: 12218 ORCHID LANE
City-St-Zip: THONOTOSASSA, FL 33592

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:

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: TAMLYN R. WARD

PD

04/28/2004

Electronic Signature of Signing Officer or Director

Date