

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V55826

Entity Name: KGS SERVICES, INC.

FILED
Apr 28, 2004
Secretary of State

Current Principal Place of Business:

1746 E. ADAMS STREET
JACKSONVILLE, FL 32202

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1346
MACCLENNY, FL 32063 US

New Mailing Address:

PO BOX 60664
JACKSONVILLE, FL 32236-066 US

FEI Number: 59-3137205

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FOWLER, SAMUEL J.
1746 E. ADAMS STREET
JACKSONVILLE, FL 32202 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: P () Delete
Name: FOWLER, SAMUEL J
Address: 6098 SHELLY LANE
City-St-Zip: MACCLENNY, FL 32063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FOWLER, SAMUEL J
Address: 877 SHERBROOK LANE E.
City-St-Zip: JACKSONVILLE, FL 32221 US

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: SAMUEL J. FOWLER JR.

P

04/28/2004

Electronic Signature of Signing Officer or Director

Date