

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000006158

FILED
Apr 29, 2005
Secretary of State

Entity Name: FACSERVICES, INC.

Current Principal Place of Business:

1901 NORTH GLENVILLE DRIVE, SUITE 702
RICHARDSON, TX 75081

New Principal Place of Business:

Current Mailing Address:

1901 NORTH GLENVILLE DRIVE, SUITE 702
RICHARDSON, TX 75081

New Mailing Address:

FEI Number: 75-2623098 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: DVP () Delete
Name: HAN, JENNIFER Y
Address: ONE CENTENNIAL AVE.
City-St-Zip: PISCATAWAY, NJ 08855

Title: DEVP () Delete
Name: MCGRATH, J PAUL
Address: ONE CENTENNIAL AVE.
City-St-Zip: PISCATAWAY, NJ 08855

Title: PSTV () Delete
Name: GOODREAU, ROBERT W
Address: 1901 NORTH GLENVILLE DRIVE, SUITE 702
City-St-Zip: RICHARDSON, TX 75081

Title: CEO () Delete
Name: MAYHEW, JIMMIE L
Address: ONE CENTENNIAL AVENUE
City-St-Zip: PISCATAWAY, NJ 08855

Title: EVP () Delete
Name: KISSEL, W CRAIG
Address: ONE CENTENNIAL AVE.
City-St-Zip: PISCATAWAY, NJ 08855

Title: EVP () Delete
Name: MASSENGILL, R SCOTT
Address: ONE CENTENNIAL AVENUE
City-St-Zip: PISCATAWAY, NJ 08855

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: GUSTAFSSON, MARY E
Address: ONE CENTENNIAL AVE.
City-St-Zip: PISCATAWAY, NJ 08855

Title: D (X) Change () Addition
Name: HAN, JENNIFER Y
Address: ONE CENTENNIAL AVE.
City-St-Zip: PISCATAWAY, NJ 08855

Title: CEO (X) Change () Addition
Name: GOODREAU, ROBERT W
Address: 1901 NORTH GLENVILLE DRIVE, SUITE 702
City-St-Zip: RICHARDSON, TX 75081

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

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

Title: AT (X) Change () Addition
Name: SMOLEN, ROBERT S
Address: 3600 PAMMEL CREEK RD
City-St-Zip: LA CROSSE, WI 54601

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: ROBERT S. SMOLEN

AT

04/29/2005

Electronic Signature of Signing Officer or Director

_____ Date