2005 FOR PROFIT CORPORATION
. ANNUAL REPORT (AR)

## DOCUMENT # F04000004690 **Secretary of State** 1. Entity Name TECHNICAL APPROACH TO SECURE CONFINEMENT, INC. (TASC, INC.) Principal Place of Business Mailing Address 731 W. WADLEY, BLDG M 731 W. WADLEY, BLDG M MIDLAND TX 79705 MIDLAND TX 79705 2. Principal Place of Business 3. Mailing Address Suite, Apt #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) Applied For 4. FEI Number City & State City & State 75-2459513 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Separative typed or printed name of registered agent and title if applicable CATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10, OFFICERS AND DIRECTORS 11. PSTC TITLE Change ☐ Addition TITLE ☐ Delete U000000245624 02/28/05-80072-013 158.75 NAME POWELL, FRANK B NAME STREET ADDRESS 731 W. WADLEY, BLDG M STREET ADDRESS CITY ST ZIP MIDLAND TX 79705 CITY ST-ZP VPVC TITLE Delete MILE Change Addition NAME EMERSON, CARL SONNY NAME STREET ADDRESS STREET ADDRESS 731 W. WADLEY, BLDG M C/17 - S1 - Z/P MIDLAND TX 79705 CiTY-ST-ZIP Change Addition THLE Delete 7-118 NAME NAME STREET ADDRESS STHEET ADDRESS CHT-51-2P CITY-ST-ZIP TOLE Delete THEF Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-SI-7P ☐ Delete TOTLE ☐ Change Addition HILLE NAME NAME STREET ADDRESS STREET ADDRESS C:IY-SI-ZIP CHY-ST- DP ☐ Change ☐ Addition Delete HDF TITLE NAME NAME STREET ADDRESS STREET ACORESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

2/25/05 (432) (82-6852

FILED

Feb 28, 2005 08:00 AM