2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000018643

Entity Name: GPS AERIAL SERVICES, INC.

FILED Jan 22, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4621 S ATLANTIC AVE 1838 TARA MARIE LANE **SUITE 7707** PORT ORANGE, FL 32127 PONCE INLET, FL 32127

New Mailing Address: Current Mailing Address:

4621 S ATLANTIC AVE P O BOX 238360

SUITE 7707 PORT ORANGE, FL 32123-386 US PONCE INLET, FL 32127 US

FEI Number: 59-3172130 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CREED, KENNETH M JR CLARKE, TERESA M 1838 TARA MARIE LANE 4621 S ATLANTIC AVE **SUITE 7707** PORT ORANGE, FL 32128 US PONCE INLET, FL 32127 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: TERESA M CLARKE 01/22/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition CREED, KENNETH M JR CREED, KENNETH M JR Name: Name:

770 AIRPORT ROAD, SUITE 25 12210 GINAMI STREET Address: Address: City-St-Zip: ORMOND BEACH, FL 32174 City-St-Zip: ANCHORAGE, AK 99516

Title: () Delete Title: () Change () Addition Name: CLARKE, TERESA M Name: Address:

1838 TARA MARIE LANE Address: PORT ORANGE, FL 32128 US City-St-Zip: 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: TERESA M CLARKE 0 01/22/2005