

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005234

FILED  
Jan 24, 2005  
Secretary of State

Entity Name: EQUITY DERIVATIVES, INC.

## Current Principal Place of Business:

9265 LAZY LANE  
TAMPA, FL 33694

## New Principal Place of Business:

3740 W. LAMBRIGHT ST.  
TAMPA, FL 33614

## Current Mailing Address:

P.O. BOX 342093  
TAMPA, FL 33694

## New Mailing Address:

FEI Number: 71-0857735

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

NOLAND, FRANK  
4007 MAJESTY PALM CT.  
TAMPA, FL 33624 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: CP ( ) Delete  
Name: OGLE, F.L.  
Address: 9265 LAZY LANE  
City-St-Zip: TAMPA, FL 33694

Title: W ( ) Delete  
Name: NOLAND, FRANK  
Address: 9265 LAZY LANE  
City-St-Zip: TAMPA, FL 33694

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P D (X) Change ( ) Addition  
Name: OGLE, F.L.  
Address: 3740 W. LAMBRIGHT ST.  
City-St-Zip: TAMPA, FL 33614

Title: VP D (X) Change ( ) Addition  
Name: NOLAND, FRANK  
Address: 3740 W. LAMBRIGHT ST.  
City-St-Zip: TAMPA, FL 33614

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: FRANK NOLAND

VP

01/24/2005

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date