

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005755

FILED  
Jan 06, 2005  
Secretary of State

Entity Name: GEARS, INC.

**Current Principal Place of Business:**

3425 ASTROZON BLVD.  
COLORADO SPRINGS, CO 80910

**New Principal Place of Business:**

**Current Mailing Address:**

3425 ASTROZON BLVD.  
COLORADO SPRINGS, CO 80910

**New Mailing Address:**

FEI Number: 81-0826066

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
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: PC ( ) Delete  
Name: FRAME, WILLIAM A  
Address: 1801 N. TEJON ST  
City-St-Zip: COLORADO SPRINGS, CO 80907

Title: WVC ( ) Delete  
Name: FRAME, WILLIAM A III  
Address: PO BOX 721  
City-St-Zip: CRESTED BUTTE, CO 81224

Title: ST ( ) Delete  
Name: WARREN, PATTY  
Address: 3425 ASTROZON BLVD.  
City-St-Zip: COLORADO SPRINGS, CO 80910

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

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

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: P WARREN

S/T

01/06/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date