## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G66633

FILED Apr 07, 2005 Secretary of State

Entity Name: THE WEALTH TRANSFER GROUP, INCORPORATED

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

283 CRANES ROOST BLVD 283 CRANES ROOST BLVD

SUITE 111 SUITE 145

ALTAMONTE SPGS, FL 32701 ALTAMONTE SPGS, FL 32701

Current Mailing Address: New Mailing Address:

283 CRANES ROOST BLVD 283 CRANES ROOST BLVD SUITE 111 SUITE 145

ALTAMONTE SPGS, FL 32701 ALTAMONTE SPGS, FL 32701

FEI Number: 59-2392678 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:

SLANE, ROBERT C SLANE, ROBERT C 283 CRANES ROOST BLVD 283 CRANES ROOST BLVD

SUITE 111 SUITE 145

ALTAMONTE SPRINGS, FL 32701 US ALTAMONTE SPRINGS, FL 32701 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: 04/07/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition

 Name:
 SLANE, ROBERT C
 Name:
 SLANE, ROBERT C

 Address:
 1233 WELLINGTON TERR.
 Address:
 1233 WELLINGTON TERRACE

Address: 1233 WELLINGTON TERR. Address: 1233 WELLINGTON TERRAC
City-St-Zip: MAITLAND, FL 32751 City-St-Zip: MAITLAND, FL 32751

Title: V ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 SLANE, SANDRA M
 Name:

 Address:
 1233 WELLINGTON TERRACE
 Address:

 City-St-Zip:
 MAITLAND, FL 32751
 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: ROBERT C. SLANE PD 04/07/2005