

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J04099

Entity Name: TASK INC.

FILED  
Apr 13, 2005  
Secretary of State

## Current Principal Place of Business:

3241 SABAL PALM MANOR  
APT 108  
DAVIE, FL 33024 US

## New Principal Place of Business:

6872 GALLE CT  
ORLANDO, FL 32818 US

## Current Mailing Address:

3241 SABAL PALM MANOR  
APT 108  
DAVIE, FL 33024 US

## New Mailing Address:

6872 GALLE CT  
ORLANDO, FL 32818 US

FEI Number: 59-2641771

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ZECKLER, LISSETTE  
3241 SABAL PALM MANOR  
APT 108  
DAVIE, FL 33024 US

## Name and Address of New Registered Agent:

ZECKLER, LISSETTE  
6872 GALLE CT  
ORLANDO, FL 32818 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:

04/13/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: ZECKLER, JOHN L  
Address: 3241 SABAL PALM MANOR APT 108  
City-St-Zip: DAVIE, FL 33024

Title: ST ( ) Delete  
Name: ZECKLER, LISSETTE  
Address: 3241 SABAL PALM MANOR APT 108  
City-St-Zip: DAVIE, FL 33024

Title: VP ( ) Delete  
Name: ZECKLER, JOAN M  
Address: 3241 SABAL PALM MANOR APT 108  
City-St-Zip: DAVIE, FL 33024

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: ZECKLER, JOHN L  
Address: 6872 GALLE CT  
City-St-Zip: ORLANDO, FL 32818

Title: ST (X) Change ( ) Addition  
Name: ZECKLER, LISSETTE  
Address: 6872 GALLE CT  
City-St-Zip: ORLANDO, FL 32818

Title: VP (X) Change ( ) Addition  
Name: ZECKLER, JOAN M  
Address: 6872 GALLE CT  
City-St-Zip: ORLANDO, FL 32818

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: JOHN L ZECKLER

PRES

04/13/2005

Electronic Signature of Signing Officer or Director

Date