

**2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Mar 31, 2005  
Secretary of State**

DOCUMENT# K02398

Entity Name: ARROWHEAD MANAGEMENT, INC.

**Current Principal Place of Business:**

4602 DOGWOOD HILLS COURT  
BRANDON, FL 33511

**New Principal Place of Business:**

3980 TAMPA ROAD  
SUITE 202  
TAMPA, FL 34677

**Current Mailing Address:**

4602 DOGWOOD HILLS COURT  
BRANDON, FL 33511

**New Mailing Address:**

3980 TAMPA ROAD  
SUITE 202  
TAMPA, FL 34677

FEI Number: 59-2856054

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MELLI, CLAUDE  
4602 DOGWOOD HILLS COURT  
BRANDON, FL 33511 US

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

RICKARD, JAMES I  
3980 TAMPA ROAD  
SUITE 202  
TAMPA, FL 34677 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: JAMES I RICKARD

03/31/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DPT ( ) Delete  
Name: POCHEZ, PATRICE  
Address: 4602 DOGWOOD HILLS COURT  
City-St-Zip: BRANDON, FL 33511

Title: DS ( ) Delete  
Name: MELLI, CLAUDE  
Address: 4602 DOGWOOD HILLS COURT  
City-St-Zip: BRANDON, FL 33511

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

Title: DP (X) Change ( ) Addition  
Name: POCHEZ, PATRICE  
Address: 3980 TAMPA ROAD, SUITE 202  
City-St-Zip: TAMPA, FL 34677

Title: DVPS (X) Change ( ) Addition  
Name: RICKARD, JAMES I  
Address: 3980 TAMPA ROAD, SUITE 202  
City-St-Zip: TAMPA, FL 34677

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: JAMES I RICKARD

DVPS

03/31/2005

Electronic Signature of Signing Officer or Director

Date