

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M88663

FILED  
Feb 23, 2005  
Secretary of State

Entity Name: BLUE WATER TOWERS & TOPS, INC.

## Current Principal Place of Business:

% C T CORPORATION SYSTEM  
1240 WEST INDUSTRIAL AVENUE #6, 7 & 8  
BOYNTON BEACH, FL 33426 US

## New Principal Place of Business:

## Current Mailing Address:

% C T CORPORATION SYSTEM  
1240 WEST INDUSTRIAL AVENUE 6, 7 & 8  
BOYNTON BEACH, FL 33426 US

## New Mailing Address:

FEI Number: 65-0059874      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RAY, JEFF  
126 NE 93 ST.  
MIAMI, FL 33138 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: DP ( ) Delete  
Name: RAY, JEFF,  
Address: 126 NE 93 ST.  
City-St-Zip: MIAMI, FL

Title: DVP ( ) Delete  
Name: BRUCE, LARRY,  
Address: 5914 TERRAGON DRIVE  
City-St-Zip: WEST PLAM BEACH, FL

Title: ST ( ) Delete  
Name: MCCracken, SCOTT  
Address: 3339 HOUSATONIC DR  
City-St-Zip: W PALM BCH, FL

Title: VP ( ) Delete  
Name: NORTH, SCOTT  
Address: 7610 CLARKE ROAD  
City-St-Zip: WEST PALM BEACH, FL 33406

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: ST (X) Change ( ) Addition  
Name: MCCracken, SCOTT  
Address: 1221 ISLES CT.  
City-St-Zip: BOYNTON BEACH, FL 33426

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: SCOTT MCCracken

ST

02/23/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date