

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000016872

FILED
May 04, 2005
Secretary of State

Entity Name: TOTAL SHUTTER TECHNOLOGIES INC.

Current Principal Place of Business:

6337 RAVENWOOD DR.
SARASOTA, FL 34243

New Principal Place of Business:

Current Mailing Address:

6337 RAVENWOOD DR.
SARASOTA, FL 34243

New Mailing Address:

P.O. BOX 51948-0316
SARASOTA, FL 34232

FEI Number: 65-0988013

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PUTZ, KENNETH A
6337 RAVENWOOD DR.
SARASOTA, FL 34243 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: PUTZ, DANIEL R
Address: 6337 RAVENWOOD DRIVE
City-St-Zip: SARASOTA, FL 34243

Title: P (X) Delete
Name: PUTZ, KENNETH A
Address: 6337 RAVENWOOD DRIVE
City-St-Zip: SARASOTA, FL 34243

Title: V (X) Delete
Name: PUTZ, VICKIE M
Address: 6337 RAVENWOOD DRIVE
City-St-Zip: SARASOTA, FL 34243

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: PUTZ, KENNETH A PRES
Address: 6337 RAVENWOOD DRIVE
City-St-Zip: SARASOTA, FL 34243

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: KENNETH A. PUTZ

PRES

05/04/2005

Electronic Signature of Signing Officer or Director

_____ Date