## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Sep 02, 2005 8:00 am Secretary of State DOCUMENT # P02000030677 09-02-2005 90017 003 \*\*\*150.00 BIRDSALL INVESTMENTS, INC. Principal Place of Business Mailing Address 25105 N LAKE DR 25105 N LAKE DR 50064807 SANFORD, FL 32773 SANFORD, FL 32773 2. Principal Place of Business 3. Mailing Address 05032005 CR2E034 (10/03) Chg-P 4. FEI Number Applied For 02-0562856 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Register Name and Address of New Registered Agent **BIRDSALL, JEREMY** 25105 N LAKE DR SANFORD, FL 32773 City 8. 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. I am familia the obligations of registered agent. SIGNATURE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Due by September 7, 2005 Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE TODE Change . Delete NAME BIRDSALL, JEREMY STREET ADDRESS 25105 N LAKE DR STREET ADDRESS CITY-ST-ZIP SANFORD, FL 32773 CITY-ST-ZIP TITLE ☐ Detete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Change ☐ Delete TITLE ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TILLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-78P TITLE ☐ Detete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. 683

**FILED**