2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 222665

Entity Name: PITT VARNES, INC.

FILED Jan 12, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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100 NANCY PLACE PALATKA, FL 32177

Current Mailing Address: New Mailing Address:

100 NANCY PLACE PALATKA, FL 32177

FEI Number: 59-0920101 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

VARNES, W. GRADY 100 NANCY PLACE PALATKA, FL 32177 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:

Electronic Signature of Registered Agent Date

Liectronic dignature of Negistered Agent

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VDS () Delete Title: VD (X) Change () Addition

 Name:
 LOFTEN, GLENDA V
 Name:
 LOFTEN, GLENDA V

 Address:
 5864 ELDER DR
 Address:
 100 NANCY PLACE

 City-St-Zip:
 W PALM BCH, FL 33415
 City-St-Zip:
 PALATKA, FL 32177

Title: PDC () Delete Title: () Change () Addition

 Name:
 VARNES, W. GRADY
 Name:

 Address:
 100 NANCY PLACE
 Address:

 City-St-Zip:
 PALATKA, FL 32177
 City-St-Zip:

Title: TD () Delete Title: TDS (X) Change () Addition

 Name:
 VARNES, SHARON S
 Name:
 VARNES, SHARON S

 Address:
 100 NANCY PLACE
 Address:
 100 NANCY PLACE

 City-St-Zip:
 PALATKA, FL 32177
 City-St-Zip:
 PALATKA, FL 32177

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: WILLIAM GRADY VARNES PRES 01/12/2005