

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 308949

Entity Name: PENNEX, INC.

FILED
Apr 30, 2005
Secretary of State

Current Principal Place of Business:

123 FAIRFIELD AVE
JOHNSTOWN, FL 15901

New Principal Place of Business:

165 FAIRFIELD AVE
JOHNSTOWN, FL 15901

Current Mailing Address:

123 FAIRFIELD AVE
JOHNSTOWN, FL 15901

New Mailing Address:

165 FAIRFIELD AVE
JOHNSTOWN, FL 15901

FEI Number: 25-1876611

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KURVIN, STEPHEN H ESQ.
7 SOUTH LIME AVENUE
SARASOTA, FL 34237 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: SHILEY, STANLEY
Address: 123 FAIRFIELD AVE
City-St-Zip: JOHNSTOWN, FL 15901

Title: DV (X) Delete
Name: DRAGOVICH, ANN
Address: 123 FAIRFIELD AVE
City-St-Zip: JOHNSTOWN, FL 15901

Title: DV () Delete
Name: GRAHAM, MICHELLE R
Address: 305 FRANKLIN ST
City-St-Zip: JOHNSTOWN, PA 15901

Title: DST () Delete
Name: SZEWCZYK, LINDA J
Address: 305 FRANKLIN ST
City-St-Zip: JOHNSTOWN, PA 15901

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SHILEY, STANLEY
Address: 165 FAIRFIELD AVE
City-St-Zip: JOHNSTOWN, FL 15901

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

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: STANLEY SHILEY

P

04/30/2005

Electronic Signature of Signing Officer or Director

Date