2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2005
Secretary of State

DOCUMENT# 361160

Entity Name: MILITARY DISTRIBUTORS, INC.

Current Principal Place of Business:

400 RACETRACK ROAD
OLDSMAR, FL 34677 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 728
OLDSMAR, FL 34677 US

New Mailing Address:

FEI Number: 59-1303670 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SOROTA, JOSEPH J JR
28100 US HWY 19 NORTH
STE 501
CLEARWATER, FL 34621 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: D ( ) Delete
Name: PARKER, CHARLOTTE H.,
Address: 710 EASTLAKE DRIVE
City-St-Zip: TARPON SPRINGS, FL 34688

Title: DST ( ) Delete
Name: PARKER, WILLIAM M.,
Address: 710 EASTLAKE DRIVE
City-St-Zip: TARPON SPRINGS, FL 34688

Title: DST ( ) Delete
Name: KOEHN, SHARON PARKER
Address: 1364 PINELLAS RD
City-St-Zip: BELLEAIR, FL 33756

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PST (X) Change ( ) Addition
Name: PARKER, WILLIAM M.,
Address: 710 EASTLAKE DRIVE
City-St-Zip: TARPON SPRINGS, FL 34688

Title: D (X) Change ( ) Addition
Name: PARKER-MEEK, SHARON
Address: 321 LOTUS PATH
City-St-Zip: CLEARWATER, FL 33756

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 M. PARKER PRES 03/21/2005

Electronic Signature of Signing Officer or Director Date